Western Health and Social Care Trust

Public Authority Statutory Equality and Good Relations Duties
Annual Progress Report 2014-15

Contact:

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- Section 49A of the Disability Discrimination Act 1995 and Disability Action Plan
  - As above
  - Name:
  - Telephone:
  - Email:

Documents published relating to our Equality Scheme can be found at:
Please insert link or details here

Signature:

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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 2014 and March 2015
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 2014-15, 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.

Disability Action Plan Workshop 30 September 2014

The Western Health and Social Care Trust (WHSCT), in partnership with the other Health and Social Care (HSC) Trusts and the Public Appointments Unit, DHSSPS, organised a workshop for representatives from the Disability sector. The workshop was in response to issues raised regarding the under representation of people with a disability on Public Bodies, which is reflected in the Trust’s Disability Action Plan. The event was attended by over 40 delegates and feedback was very positive.

Speakers included representatives from HSC Equality Leads, MENCAP, DHSSPS, Commissioner for Public Appointments, and the Chairman, WHSCT.

Personal & Public Involvement (PPI)

An Annual PPI Progress Report is accessible via the Western Trust’s website and staff intranet.

The WHSCT PPI Consultation Scheme was revised in March 2015 in line with new guidance issued from DHSSPS NI and the Equality Commission for NI during winter 2014. The main aim of the Consultation Scheme is to set out the Trust’s commitment to undertaking appropriate, timely and inclusive consultation in accordance with our statutory PPI and Equality duties. The revised PPI Consultation Scheme should be read in conjunction with the WHSCT Equality Scheme (2014-2017). These documents are available on the Trust Website and Intranet http://www.westerntrust.hscni.net/about/Publications.htm.

Provision of Foreign Language Interpreting

The Trust continues to provide a robust face to face and telephone interpreting service for patients and clients who do not speak English as a first language. This is a part of the Trust’s commitment to ensuring and promoting equality of access to all our services. During 2014-15 the total number of interpreting episodes was 6,432, a similar uptake to 2013-2014, with the top four languages being Polish, Hungarian, Cantonese and Lithuanian. To support this work the Trust continues to deliver Working with Interpreter
The Regional Review of Interpreting was commissioned by the Health & Social Care Board (HSCB) in 2011 and recommended a re-profiling of interpreting usage by increasing the ratio of telephone interpreting to face to face interpreting. It also recommended the transfer of management responsibility from Belfast Health & Social Care Trust (BHSCT) to the Business Services Organisation (BSO) in accordance with strategic direction for regional transactional services and significant investment in a new booking system. Accordingly the management of the Northern Ireland Health and Social Care Interpreting Service (NIHSCIS) was transferred to BSO on 1 October 2014.

Work has been ongoing with Big Word, the telephone interpreting provider, to ensure that they can cater for the anticipated increase in demand once the new IT system goes live in Autumn 2015. Guidance and training will be provided for Trust Staff.

A Regional Advisory Group will be established to inform the strategic direction of the service.

Western Health and Social Care Trust Disability Steering Group
The group continues to meet quarterly and includes representatives from Community & Voluntary Groups as well as Trust Staff and the Patient Client Council.

The key policy and service developments to better promote equality of opportunity and good relations are outlined as follows:

1.1 The Trust continues to mainstream Equality/Section 75 duties throughout the Trust.

1.2 Procedures are in place to ensure that new and revised polices are subject to Equality Screening and Equality Impact Assessment (EQIA) where applicable.

1.3 The Equality & Involvement (E&I) Team has continued to build on training carried out in previous years to raise staff awareness of their obligations under Section 75. See Section 24 of this report for detail re training delivered during 2014 – 2015.

1.4 The Trust continues to promote effective internal and external communication via a wide range of mediums.

1.5 The Trust is committed to making its services accessible and information available in alternative formats.

1.6 During this reporting period the E&I Team refreshed the Trust local consultee database to support effective consultation and engagement.

1.7 The Trust provides an accessible complaints procedure for all patients and clients and continues to monitor any complaints received.

1.8 The E&I Team maintain a screening log which is updated weekly and records equality assurance processes.

1.9 The Trust has an established Western Equality and Human Rights Forum (WEHRF) chaired by the Director of Performance and Service Improvement. This group oversees
and monitors progress on the Trust’s Equality Action Plan.

1.10 Quarterly Equality Screening Reports outlining the screening outcomes of all policies/proposals approved in the quarter have been made available since 1 April 2011. Reports can be accessed on the Trust's website and staff intranet. Consultees are advised of the availability of the reports.

1.11 As recommended, by the Equality Commission's Guidance for Public Authorities on the implementation of Section 75, the Western Trust Equality Scheme is accompanied by an Action Based Plan (Equality Action Plan). The Trust’s new Equality Action Plan will run from 2014 – 2017.

1.12 Section 75 monitoring is on-going for all new Trust staff.

1.13 With the introduction of the Human Resource, Payroll, Travel and Subsistence (HRPTS) system staff can maintain and change Equality and Diversity data, apart from Community Background. It is anticipated that this will aid accurate reporting on Section 75 data.

1.14 Under the chairmanship of the Director of Adult Mental Health and Disability Services the Trust’s Disability Steering Group (DSG) continued to meet during this reporting period. DSG members include representatives from all Service Directorates, Human Resources, Facilities Management and Equality & Involvement, as well as nominees from Action on Hearing Loss (formerly RNID), RNIB, Action Mental Health, Disability Action, Mencap and service user representation. The Steering Group has been a key driver for scrutinising and monitoring progress on the Disability Action Plan. The Head of E&I offers support to the running and co-ordination of this group and also sits on sub-groups on Trust building accessibility, employment and training and accessible communication matters for people with disabilities.

1.15 The Western Trust’s Head of E&I is a member of the Regional Equality and Human Rights Steering Group (REHRSG). REHRSG bi-monthly meetings are led by the DHSSPSNI, in partnership with HSC Equality Leads. As a member of this Forum the Head of E&I shares information and updates from the regional meetings with Trust Directors on a regular basis.

1.16 The Western Trust continued to participate on a number of the workstreams associated with the Physical and Sensory Disability Strategy. The Action Plan developed to support implementation of the Strategy recognises the importance of person centred care planning and involvement of service users and partnership working with community, voluntary and independent sectors

1.17 Considerable work has been undertaken during this reporting period with regard to supporting carers. Monitoring of progress in relation to Direct Payments, Respite and Short Breaks, and update of carers assessments has progressed well. The Trust employs a Carers Coordinator and two Development Workers.

NB: The above list is not exhaustive; it is a highlight of some of the key policy and service developments for this reporting period.
HSC Adoption of PPI Standards

During the year ahead Trusts will commence monitoring against a set of new standards for PPI, developed by the Public Health Agency (PHA) and endorsed by the Department of Health.

HSC Pilot PPI Training Programme

As part of PHA PPI workstreams a regionally agreed PPI staff training programme was piloted during 2014-2015. This will be rolled out to all HSC Trusts for staff uptake and will be supported by the E&I Team.

NIHRC Human Rights Inquiry into Emergency Health Care

The Trust participated in the Human Rights inquiry and provided statistical data and qualitative information with regard to emergency health care provision. Trust staff also took part in Public Hearings in Bangor, Downpatrick and Belfast. The Report from the inquiry was published in May 2015.

Self Directed Support (SDS)

The Trust in partnership with the Health and Social Care Board (HSCB) is introducing 'Self Directed Support'. This will provide more choice and flexibility for eligible individuals enabling them to tailor a care package that best suits their needs and will offer more control, flexibility and independence to people as they choose the support they want. It also enables people to choose how their support is provided and gives them more control over their personal budget.

Consultation on an EQIA by HSCB commenced in February 2015. They adopted a regional approach in coordinating consultations with Section 75 groups and were supported by each of the Trusts in facilitating this. Staff awareness sessions on SDS will commence in WHSCT during April 2015.
PART A

2 Please provide examples of outcomes and/or the impact of equality action plans/ measures in 2014-15 (or append the plan with progress/examples identified).

Refer to Appendix 1 - Western Health and Social Care Trust Equality Action Plan Progress Report 2014-2015
PART A

3 Has the application of the Equality Scheme commitments resulted in any changes to policy, practice, procedures and/or service delivery areas during the 2014-15 reporting period? (tick one box only)

☒ Yes ☐ No (go to Q.4) ☐ Not applicable (go to Q.4)

Please provide any details and examples:

Please refer to response to Question 1 in this document and also to Appendix 1 - WHSCT Equality Action Plan Progress Report 2014/15.

To further ensure the efficient and effective application of the Trust's Equality Scheme and equality screening process HSC Trust Equality Leads, having taken on board the views of the Equality Commission, revised their equality screening template. The revised template was piloted by 2 of the HSC Trusts during the current reporting period. The learning from this pilot along with the outcome of consultation will inform the future roll out of the revised template thus ensuring the efficient and effective application of the S75 equality duties in informing and shaping future policy development and decision making processes within the Trust.

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?

Please provide any details and examples:

Please refer to response to Question 1 in this document and also to Appendix 1 - WHSCT Equality Action Plan Progress Report 2014/15.

Human Resources Payroll and Travel System (HRPTS)

This system means that staff are now able to update their own Equality and Diversity Data. This provides more accurate data for Equality Screening and Equality Impact Assessments (EQIA).

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

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)*:

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**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 2014-15 reporting period? *(tick one box only)*

- [x] 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:

5 Were the Section 75 statutory duties integrated within performance plans during the 2014-15 reporting period? *(tick one box only)*

- [x] Yes, organisation wide
- [ ] Yes, some departments/jobs
- [ ] No, this is not an Equality Scheme commitment
PART A

☐ No, this is scheduled for later in the Equality Scheme, or has already been done
☐ Not applicable

Please provide any details and examples:

Integrated within Knowledge and Skills Framework (KSF) and staff training.

6 In the 2014-15 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 2013-14 report
☐ Not applicable

Please provide any details and examples:

WHSCT Trust Delivery Plan:

"Through the implementation of the its Personal and Public Involvement Strategy and Action Plan and revised Equality Scheme and Action Plan, the Trust will work closely with the community and voluntary sector to ensure that all of the 9 Section 75 categories and hard to reach public groups are appropriately involved in service design and delivery."

"Commitment to Consultation

Consultation is an intrinsic element within the Trust’s approach to Personal and Public Involvement and the Trust’s Equality Scheme. The Equality Scheme sets out the Trust’s arrangements for consulting in accordance with the principles contained in the Equality Commission Northern Ireland (ECNI) Guidance “Section 75 of the NI Act 1998”. In taking forward consultation the Trust shall continue to further embed community development approaches to support local involvement and innovation in the future delivery of services including working in partnership with other key stakeholders to encourage and support the development of social enterprise models."

Equality action plans/measures
PART A

7 Within the 2014-15 reporting period, please indicate the number of:

- Actions completed: 4
- Actions ongoing: 48
- Actions to commence: 0

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

Refer to Appendix 1 - Western Health and Social Care Trust Equality Action Plan Progress Report 2014-2015

8 Please give details of changes or amendments made to the equality action plan/measures during the 2014-15 reporting period (points not identified in an appended plan):

No change to the Equality Action Plan - Plan is regularly reviewed, monitored and updated.

9 In reviewing progress on the equality action plan/action measures during the 2014-15 reporting period, the following have been identified: (tick all that apply)

- Continuing action(s), to progress 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 2014-15 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:

Future of Community Equipment and Home Delivery of Continence Products

The WHSCT entered into a consultation process with a range of stakeholders on a proposed new model for community equipment, including a home delivery service of continence products. During March 2014 the Trust undertook 3 PPI events in Derry, Omagh and Fermanagh in relation to this consultation. These events were attended by both service users and their carers. Community Stores staff were fully briefed, group
meetings were held on 21 January 2014 and individual meetings were held on 19 March 2014. WHSCT Senior Managers briefed Fermanagh District Council on 14 April 2014. A presentation was also made to the Western Local Commissioning Group (LCG) in the same month.

The consultation period began on 14 February 2014 and closed on 9 May 2014. The consultation document was made widely available. 3,000 leaflets in relation to the consultation were distributed by Trust homecare staff, 6,200 leaflets were distributed by post to current users of the community equipment service and continence service and 247 copies of the document were sent out by email to the Trust consultee list. All responses were returned to the Assistant Director of Primary & Community Care. Responses were returned in a number of formats (questionnaire, letter, email, telephone).

In the 2014-15 reporting period, given the consultation methods offered, which consultation methods were most frequently used by consultees: (tick all that apply)

- [x] Face to face meetings
- [x] Focus groups
- [x] Written documents with the opportunity to comment in writing
- [x] Questionnaires
- [x] Information/notification by email with an opportunity to opt in/out of the consultation
- [ ] Internet discussions
- [ ] Telephone consultations
- [x] Other (please specify): Advocacy groups, e.g., VOYPIC (Voice of Young People in Care), targeting pre-existing groups, Internal Forums, public consultation meetings.

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:

Future of Community Equipment and Home Delivery of Continence Products

Service users, carers, families, Trust staff and Community and Voluntary Groups received information on the proposal in various formats, including e.g. Consultation Events, information on Trust Website; 3,000 leaflets in relation to the consultation were distributed by Trust homecare staff, 6,200 leaflets were distributed by post to current users of the community equipment service and continence service and 247 copies of the document were sent out by email to the Trust consultee list. The Trust consultee list includes representatives from all Section 75 groups. All responses were returned to the
PART A

Assistant Director of Primary & Community Care. Responses were returned in a number of formats (questionnaire, letter, email, telephone).

All consultation documents are published on the Trust website and are available in alternative formats on request.

13 Were any awareness-raising activities for consultees undertaken, on the commitments in the Equality Scheme, during the 2014-15 reporting period? (tick one box only)

☐ Yes ☐ No ☐ Not applicable

Please provide any details and examples:

New/Updated documents are forwarded regularly to the Trust Consultee List following approval within the Trust including e.g. ECNI Annual Progress Reports, Quarterly Screening Reports, PPI Annual Progress Report. Consultees are also advised of Consultations and Events.

14 Was the consultation list reviewed during the 2014-15 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)

[insert link to any 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):

32

16 Please provide the number of assessments that were consulted upon during 2014-15:

0 Policy consultations conducted with screening assessment presented.

1 Policy consultations conducted with an equality impact assessment (EQIA) presented.

0 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:

Future of Community Equipment and Home Delivery of Disposable Continence Products
12 week consultation period from 14 February 2014 to 12 June 2014.

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

<table>
<thead>
<tr>
<th>Yes</th>
<th>No concerns were raised</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
</table>

Please provide any details and examples:

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**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 2014-15 reporting period? *(tick one box only)*

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
</tr>
</thead>
</table>

Please provide any details and examples:

Future of Community Equipment and Home Delivery of Disposable Continence Products

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**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 2014-15 reporting period? *(tick one box only)*

<table>
<thead>
<tr>
<th>Yes</th>
<th>No, already taken place</th>
<th>No, scheduled to take place at a later date</th>
<th>Not applicable</th>
</tr>
</thead>
</table>

Please provide any details:

- Staff Monitoring via HRPTS
- Publication of Quarterly Screening Reports
- Collection and analysis of Interpreting provision
PART A

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:

22 Please provide any details or examples of where the monitoring of policies, during the 2014-15 reporting period, has shown changes to differential/adverse impacts previously assessed:

Monitoring is integral to ongoing screening of policies and proposals.

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:

Staff monitoring - has helped produce real time data to inform future equality screenings and Equality Impact Assessments in determining the impact of service changes on those potentially affected. Staff monitoring has also been useful to determine any policy gaps e.g. transgender policy.

HSC Emerging Themes Document - HSC Organisations worked collaboratively to gather emerging themes in relation to key inequalities experienced by the 9 equality categories. Collated data (qualitative and quantitative) was analysed and is defined, by section 75 categories, to help develop indicators of levels of inequalities. The emerging themes document can be used as evidence for future screening and equality impact assessments and is a useful resource for both health and social care staff and representative organisations. The document is reviewed and updated annually.

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 2014-15, and the extent to which they met the training objectives in the Equality Scheme.

The Western Trust continues to deliver Equality and Human Rights training in a variety of programmes. The training detailed below includes reference to/information on the Section 75 duties and Disability Duties. Further content is then developed to meet the requirements of the participants and the specific focus of the training. Much of the training is delivered by Trust staff, however for some training programmes delivery is in partnership with voluntary sector groups.

'DISCOVERING DIVERSITY' E-Learning Programme: mandatory for all Western Trust staff.
This e-learning programme is designed to ensure that HSC staff are equipped to deal with difference and diversity in a positive way. Trust Communication is used to issue regular reminders; the programme is also referenced at training delivered by the Equality & Involvement Team and flyers are routinely included in Training Packs. Uptake of the 'Discovering Diversity' E-Learning Programme is monitored.

VISUAL AWARENESS Training: continues to be offered Trustwide in association with RNIB. This training provides staff with skills and knowledge to ensure that service users with a visual impairment receive a high level service.

WORKING WITH INTERPRETERS (Foreign Language/Sign Language) Training: this training is offered Trustwide on an on-going basis. The training aims to improve the experience of patients/clients who do not have English as a first language or who have a hearing impairment. The Equality & Involvement Team also offers the training to specific teams/units, as per requests. The Working With Interpreters Training is supported by Trust Communication Support Guidelines, which contain information for staff on accessing Foreign Language and Sign Language Interpreters, and Written Translation.

EQUALITY SCREENING TRAINING: continues to be delivered by Equality & Involvement staff to Senior Managers and their staff who are involved in developing policies/proposals/strategies and implementing changes to services. The training provides information on Section 75 of the NI Act 1998 and requirements under Section 75 for Public Authorities; and informs staff why and when screening needs to take place and how to screen.

EQIA TRAINING: the Equality & Involvement Team offer specialist support and training to staff within Directorates who are involved in EQIAs/consultation exercises, on request.

EQUALITY, DIVERSITY and INCLUSION TRAINING: this training was developed and delivered as part of NVQ training for staff and is now delivered to staff within Departments across the Trust on request. It is also delivered as part of the Trust's Essential Training for Doctors programme. In addition, this training has been adapted and delivered to North West Regional College Health and Social Care students. The aim of the training is to inform participants about Equality, Diversity and Inclusion and how it applies within the Trust.

INTRODUCTION TO HUMAN RIGHTS - TRAINING OF TRAINEERS: delivered to Trust staff during 2014-2015 in association with the Northern Ireland Human Rights Commission. This training aims to equip participants with relevant knowledge about human rights and the practical tools necessary to deliver awareness raising training within their own staff teams.

'LESBIAN, GAY, BISEXUAL and/or TRANSGENDER - CREATING INCLUSIVE WORKPLACES' E-Learning Programme: available to all Trust staff.

This e-learning programme was developed by the Public Health Agency in partnership with the Southern Health and Social Care Trust and has been informed by the experiences of individuals who identify as Lesbian, Gay, Bisexual and/or Transgender (LGBT) and their carers.

The programme is designed to be used by individuals, including staff and management, working in any setting. It is hoped that it will better inform individuals and organisations
on the issues faced by lesbian, gay, bisexual and transgender and help encourage workplace settings to be more LGBT inclusive, thus helping to create a more welcoming, safe and productive work environment.

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:

All of the above training has been evaluated. Overall evaluation feedback has been positive with staff finding that training was relevant, practical and thought-provoking. For example, evaluations from Equality Screening Training showed that 93% of participants rated this training as Good/Excellent. When asked to rate how confident they felt in implementing the learning from the training, participants replied: 38% Quite Well, 45% Very Well and 13% Completely.

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

Please list any examples of where monitoring during 2014-15, across all functions, has resulted in action and improvement in relation to access to information and services:

Uptake of face to face sign language interpreting is monitored throughout the Trust. (Appendix 2)
Update of face to face and telephone foreign language interpreting is monitored (Appendix 2)
Quarterly Screening Reports
BME Carers Leaflet
Service monitoring has highlighted the lack of carers from BME communities across all 5 HSC Trusts. As a result an information leaflet for carers from BME communities has been drawn up to address this gap in service provision. This initiative has been supported by the Public Health Agency in partnership with the 5 Health & Social Care Trusts, Barnardos, Carers Matter and the Carers Trust.

The leaflet aims to identify carers from BME communities residing within each Trust area and invite these carers to be added to the Trust Carers Information List.

To date, the leaflet has been translated from English into Arabic, Bulgarian, Cantonese, Lithuanian, Mandarin, Polish, Portuguese, Romanian, Russia, Slovakian and Somali. The leaflet is available in electronic or hard copy version on request.

Regional Interpreting Service
The monitoring and review of interpreting provision has resulted in a number of key recommendations including the switch from the Belfast Trust to the BSO as the new provider as it was viewed as a better strategic fit. A further recommendation is a shift toward greater use of telephone interpreting away from a steady reliance on face to face -
where it is appropriate and safe to do so. A regional set of criteria have been developed to support HSC practitioners in deciding when best to use either telephone or face to face interpreters. Further, the development of a new IT on-line portal will further streamline the booking process and lead to a more effective and efficient use of professionally qualified interpreters and matching of clients needs across the region.

Complaints (Model Equality Scheme Chapter 8)

27 How many complaints in relation to the Equality Scheme have been received during 2014-15?

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:

May 2017

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)

Equality Screening

The HSC Trust are working with the ECNI to review the Equality Screening template and the EQIA template.

A region wide review of the current equality screening template was undertaken during the current reporting period. This has been piloted by 2 HSC Trusts - the Belfast Trust and the Northern Trust.

Discussions regarding the screening template have been ongoing for some time and HSC Trust Equality Leads had engaged with the Equality Commission on the issue that in some instances, where policies were clearly technical or clinical in nature and thus had no bearing on equality of opportunity or good relations, Service Managers and Policy Leads have highlighted issues with regard to the expectation of having to complete a lengthy form. The Commission sought reassurance that any new screening templates would be centrally quality assured and monitored.
Reform and Modernisation Proposals

The Trust will continue to screen and monitor all reform and modernisation proposals to identify any potential impact for any of the nine section 75 categories.

EQIA

The Trust will conduct an EQIA on Statutory Residential Care for Older People

NIHRC Human Rights Inquiry - Emergency Health Care

Work will be taken forward in light of the recommendations highlighted in the Inquiry Report

Training

Ongoing delivery and evaluation of a wide range of training and awareness raising for staff including the continued roll out of e-Learning. Training materials are subject to ongoing review.

Procurement

A Regional workshop is planned for 14 August 2015 focusing on Equality and Human Rights Issues in relation to Procurement, Commissioning and Planning processes. Good Practice examples and legal implications will be discussed at the event. Invitations will be extended throughout HSC organisations.

Pending new Age Regulations - implications for HSC Trusts as service providers.

In relation to the advice and services that the Commission offers, what equality and good relations priorities are anticipated over the next (2015-16) 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 Discrimination
  - Shared Parental Leave
PART A

Self Directed Support
PART B - Section 49A of the Disability Discrimination Act 1995 (as amended) and Disability Action Plans

1. Number of action measures for this reporting period that have been:

- 1 Fully achieved
- 19 Partially achieved
- Not achieved

2. Please outline below details on all actions that have been fully achieved in the reporting period.

2 (a) Please highlight what public life measures have been achieved to encourage disabled people to participate in public life at National, Regional and Local levels:

<table>
<thead>
<tr>
<th>Level</th>
<th>Public Life Action Measures</th>
<th>Outputs(^1)</th>
<th>Outcomes / Impact(^{\text{ii}})</th>
</tr>
</thead>
<tbody>
<tr>
<td>National(^{\text{iii}})</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Regional(^{\text{iv}})</td>
<td>A Regional HSC Event was held on 30th September 2014 to raise awareness of Public Appointments Process for people with a disability. Key note speakers included representatives from: SHSCT, DHSSPS, Commissioner for Public Appointments, WHSCT and SEHSCT. MENCAP chaired the event.</td>
<td>Event attended by 40 individuals from a variety of backgrounds including Disability Organisations, the Equality Commission, Voluntary / Community sector, HSC organisations and other Public Authorities.</td>
<td>To address the under representation of people with a disability on public bodies. To clearly explain the processes associated with the Public Appointment system. To increase the capacity for individuals to apply for posts. The promotion of opportunities for people with a disability on public</td>
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<tr>
<td>PART B</td>
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<td>Development and roll out of Self Directed Support arrangements which will come into effect from June 2015</td>
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<td>The Trusts in partnership with the Health and Social Care Board (HSCB) are introducing a new way of delivering Social Care Services called Self Directed Support. This system will provide more choice and flexibility for eligible individuals enabling them to tailor a care package that best suits their needs. Consultation on an EQIA was commenced by the HSCB in February 2015. Trusts facilitated consultation events in each of their areas on Self Directed Support and staff training has commenced on the proposed changes.</td>
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</tr>
<tr>
<td>bodies. A number of individuals contacted the DHSSPS Public Appointments Unit after the event and requested a further meeting to discuss their suggestions for improvements in the Appointments process. Self Directed Support will offer more control, flexibility and independence to people as they choose the support they want. Self Directed Support enables people to choose how their support is provided and gives them more control over their personal budget. Self Directed Support enables people to have more flexibility, choice and control over the support they receive, such as, • Employing their own personal assistant • having support staff visit at a time</td>
<td></td>
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</tr>
</tbody>
</table>
that you choose
• Flexible options for short breaks
• Accessing community opportunities.
Self Directed Support does not replace traditional services and people can continue with their existing package.

2(b) What **training action measures** were achieved in this reporting period?

<table>
<thead>
<tr>
<th>Training Action Measures</th>
<th>Outputs</th>
<th>Outcome / Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training Action Measures</td>
<td>Outputs</td>
<td>Outcome / Impact</td>
</tr>
<tr>
<td>2(b) What <strong>training action measures</strong> were achieved in this reporting period?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Delivery of Equality Screening Training – incorporating the Disability Duties

1. **On-going workshops held during the current reporting period (see Section 5 – Training for detail).**
   - On-going mainstreaming of the disability duties into screening and EQIA processes.
   - Increased awareness of disability duties during screening, EQIAs and decision-making processes.
   - Enhanced staff knowledge and skills re: Screening and EQIA processes.

2. **HSC Discovering Diversity E-Learning Programme for Staff - consisting of 6 modules, including Disability module.**
   - Mandatory for all Western Trust staff.
   - Regular reminders issued to staff via Trust Communication and referenced at training.
   - On-going monitoring of staff uptake of this training (see Section A, number 24 – Training for details).
   - Helps staff to build awareness and understanding of diversity, including re: people with disabilities, in the workplace and society in general.
   - Promotion of positive attitudes towards persons with disabilities.

3. **Additional Training and Awareness Actions**
   - Visual Awareness Training: The Equality & Involvement Team organised 2 sessions of Visual Awareness Training between April 2014 – March 2015, in partnership with RNIB.
   - Increased staff awareness and knowledge of people with a visual impairment. Staff also gain confidence in guiding techniques.

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### Communications Action Measures

<table>
<thead>
<tr>
<th>Communications Action Measures</th>
<th>Outputs</th>
<th>Outcome / Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong> Review of Regional Accessible Communication Guidance for HSC staff in collaboration with</td>
<td>Resource detailing models of good practice in effective communication. This updated resource involved</td>
<td>Increased amount of Trust information produced in alternative formats e.g. easy-read, larger print, use of sign language interpreters, subtitles and</td>
</tr>
<tr>
<td>Part B</td>
<td>Stakeholder input</td>
<td>Sign language on the production of DVDs. Greater staff expertise in the provision of effective communication for individuals with a range of disabilities. Trust information more accessible for all users. Improved patient experience.</td>
</tr>
<tr>
<td>---</td>
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</tr>
<tr>
<td>the disability sector was completed in February 2015.</td>
<td>stakeholder input It addresses communication barriers and gives tips and advice to enhance effective communication. The Guide assists staff to ensure that people get the support with communication that they required e.g. through the provision of sign language interpreters.</td>
<td>sign language on the production of DVDs. Greater staff expertise in the provision of effective communication for individuals with a range of disabilities. Trust information more accessible for all users. Improved patient experience.</td>
</tr>
<tr>
<td>2</td>
<td>Communication Support Guidelines - Information on Accessing: Foreign Language and Sign Language Interpreters and Written Translations</td>
<td>The WHSCT Communication Support Guidelines were updated regularly throughout 2014/15 to incorporate additional information regarding interpreting for the Irish Language and changes to contact information for NIHSCIS following their move from BHSCT to BSO. This staff booklet includes information on how and when staff should access a signer/interpreter. It is available on the staff Intranet. Information on the booklet has also been circulated via WEHRF members, staff newsletter and Trust Communication. It is referred to at Induction Training, Diversity Training and Working with Interpreters Training.</td>
</tr>
<tr>
<td>Roll out of Complaints DVD</td>
<td>Use of alternative formats to facilitate access to the HSC complaints</td>
<td>Improved accessibility for persons with a disability to access the HSC complaints</td>
</tr>
</tbody>
</table>
Enhance the patient experience via service improvements.

The Western Trust has a complaints DVD on the Trust website which provides information on the Trust complaints procedure in BSL. ISL version and subtitles to be taken forward. Improvements in patient experience and outcomes for service users and members of the public.

### 2 (d) What action measures were achieved to ‘**encourage others**’ to promote the two duties:

<table>
<thead>
<tr>
<th>Encourage others Action Measures</th>
<th>Outputs</th>
<th>Outcome / Impact</th>
</tr>
</thead>
</table>
| **1** Mainstream the Disability Duties into the Screening and EQIA processes | Screening and EQIA processes include consideration of the Disability Duties. 80 senior staff attended Equality Screening training during 2013-2014. In addition, the Equality & Involvement Team provide one-to-one training/project specific training for staff where required/requested. | • Enhanced staff knowledge and skills re: Screening and EQIA processes.  
• Increased awareness of disability duties during screening, EQIAs and decision-making processes.  
• Improved decision making and policy/service developments re: the Disability Duties. |
| **2** Provision of training sessions | Information on the Disability Duties is included in all Equality and Human Rights training, Vocational Training, Diversity Awareness and Disability Awareness training. (See Part A, Number 24 for full details of training | Staff awareness of Disability Duties has increased.  
Promotes positive attitudes towards disabled people, and encourages participation.  
Improves patient and staff experience. |
Visual Awareness Training: The Equality & Involvement Team organised 2 sessions of Visual Awareness Training between April 2014 – March 2015, in partnership with RNIB.

Increased awareness and knowledge of the Disability Action Plan and associated responsibilities for all staff.

Increased staff awareness and knowledge of people with a visual impairment. Staff also gain confidence in guiding techniques.

Provision of placements aimed at increasing work opportunities for people with a disability.

Provision of meaningful placement opportunities for persons with a disability.

To date the Trust has exceeded the target placements in this reporting period.

Greater participation of disabled persons in public life and promotion of positive attitudes toward disabled persons.

Enhancing employment skills/opportunities for participants.

The ‘New Directions Service’ for adults with a learning disability across the Trust, is currently providing support, guidance and facilitating placements etc. to 30 individuals ranging in age from 18-62yrs from urban and rural communities. To date individuals referred to the service have been supported to gain access to social, leisure activities and voluntary work experience.

2 (e) Please outline any additional action measures that were fully achieved other than those listed in the tables above:

<table>
<thead>
<tr>
<th>Action Measures fully implemented (other than Training and specific public life measures)</th>
<th>Outputs</th>
<th>Outcomes / Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
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</tbody>
</table>
3. Please outline what action measures have been **partly achieved** as follows:

<table>
<thead>
<tr>
<th>Action Measures partly achieved</th>
<th>Milestones / Outputs</th>
<th>Outcomes / Impacts</th>
<th>Reasons not fully achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td><strong>Continue to involve local disability groups and other Section 75 groups in the planning of new Omagh Enhanced Local Hospital.</strong></td>
<td>There is on-going involvement through the established Community Forums. The Forums are comprised of representation from Section 75 groupings to include people with disabilities and young people as well as local community representatives.</td>
<td>Ongoing - Omagh Local Enhanced Hospital planned opening January 2017</td>
</tr>
</tbody>
</table>
| 2                              | **Disability Employment Framework**  
**Disability Etiquette Booklet**  
**Reasonable Adjustments Guide**                                                                                                                                                                                    | These are Regionally agreed documents. The initiatives were supported by ECNI who endorsed the work of the DAP Working Groups                                                                                     | Work is continuing to develop the Western Guidelines. This work is being led by the HR directorate and is being developed with a range of stakeholders. Progress is being monitored by the Trust's Disability                                                                                                                                                                      |
PART B

| Self-Directed Support | Regional Consultation Ongoing | Individuals will have more independence and choice over their care | Consultation does not close until May 2015 and will not be rolled out to the Trust until after this. |

4. Please outline what action measures have not been achieved and the reasons why.

<table>
<thead>
<tr>
<th>Action Measures not met</th>
<th>Reasons</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
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<tr>
<td>2</td>
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</tbody>
</table>

5. What monitoring tools have been put in place to evaluate the degree to which actions have been effective / develop new opportunities for action?

(a) Qualitative

- Regional Working Groups – Stakeholder participation – quality assurance of documents and guidance
- Monitoring of DAP for Annual Progress Report to ECNI
- PPI Initiatives and Consultation processes
- Update of Audit of Inequalities – Emerging Themes document
PART B

- Review of complaints/compliments

NIHRC Enquiry into Emergency Healthcare

Feedback from Service Users

(b) Quantitative

- Performance indicators in DAP
- Screening and EQIA processes
- Complaints / Compliments
- ECNI Annual Progress Report
- HRPTS – Employee Self Service – more accurate and up-to-date staff data on S75 characteristics
- Update of Audit of Inequalities – Emerging Themes document
- 2011 Census data – utilisation in Screening and EQIA processes

Consultations on specific areas

NIHRC Enquiry into Emergency Healthcare

6. As a result of monitoring progress against actions has your organisation either:

- made any revisions to your plan during the reporting period or
- taken any additional steps to meet the disability duties which were not outlined in your original disability action plan / any other changes?

No
PART B

If yes please outline below:

<table>
<thead>
<tr>
<th>Revised/Additional Action Measures</th>
<th>Performance Indicator</th>
<th>Timescale</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
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<td>4</td>
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<tr>
<td>5</td>
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</table>

7. Do you intend to make any further **revisions to your plan** in light of your organisation’s annual review of the plan? If so, please outline proposed changes?

No

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1. **Outputs** – defined as act of producing, amount of something produced over a period, processes undertaken to implement the action measure e.g. Undertook 10 training sessions with 100 people at customer service level.

2. **Outcome / Impact** – what specifically and tangibly has changed in making progress towards the duties? What impact can directly be attributed to taking this action? Indicate the results of undertaking this action e.g. Evaluation indicating a tangible shift in attitudes before and after training.

3. **National** : Situations where people can influence policy at a high impact level e.g. Public Appointments

4. **Regional** : Situations where people can influence policy decision making at a middle impact level

5. **Local** : Situations where people can influence policy decision making at lower impact level e.g. one off consultations, local fora.

6. **Milestones** – Please outline what part progress has been made towards the particular measures; even if full output or outcomes/ impact have not been achieved.