

Equality, Good Relations and Human Rights Screening Template

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

See [Guidance Notes](#) for further background information on the relevant legislation and for help in answering the questions on this template (follow the links).

(1) Information about the Policy/Proposal

(1.1) Name of the policy/proposal

Permanent increase car park charges at acute Hospital sites (Antrim and Causeway)

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

Background/Context

During 2017 the Health and Social Care (HSC) system worked collaboratively to address the significant financial pressures facing health and social care services in 2017/18 to meet the statutory requirement of achieving a balanced financial plan. The Northern Trust was tasked by the Department of Health with developing draft savings plans to deliver its share of the savings. As part of the process during August 2017, the Trust publicly consulted on a range of 'temporary' proposals required to support the delivery of a balanced financial position at the end of the financial year. The consultation period ran from 24 August 2017 to 5 October 2017 and included the temporary proposal to 'Increase car park charges at acute hospital sites'.

All feedback received in relation to this temporary proposal was considered as part of the Trust Board decision making process and the proposal was subsequently approved by Trust Board on 13th October 2017. This plan received further endorsement from the regional Health and Social Care Board and also from the Department of Health.

The approvals currently in place are temporary in nature and as the financial climate has not altered, the Trust proposes to maintain the current increased car park charges at its two acute hospital sites on a permanent basis. The Trust committed to further public consultation if it was considered necessary for specific proposals to be made permanent and so we are taking forward this consultation.

The cost of providing the services we deliver continues to increase, with estimates suggesting 6% annually. This is due to an increasing health and social care needs of our population (with more people living with complex needs), increasing costs for goods/services, and growing expertise and innovation leading to an increased range of services and technologies available. All of these bring increases in the funding required each year to maintain our services and meet demand. Unless there is a significant immediate increase in the funding available, at the current spending levels the Trust would spend more than the funding allocated.

It has been acknowledged through several strategic reviews that there is a need for service transformation. Transformation alone will not address the financial issues and there is a need for a financial plan that goes beyond an annual cycle so that the service can plan and respond to the issues. Both transformation and robust financial planning are essential so that a safe, efficient and sustainable service is provided.

The Trust believes that given the current financial climate, the increased car parking charges should be made permanent as this will have no direct impact on front line services. Increasing car parking charges permanently at both Antrim Area and Causeway Hospitals – the only two sites in the Trust area with care park charges - will contribute in a small but practical way to help meet increasing non direct care costs.

The Trust's Traffic Management Policy was subject to a full Equality Impact Assessment and consultation in January 2009.

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

The parking tariffs at the acute hospitals have not been increased for four years.

The Trust proposes to permanently increase the tariff by 20% on both Antrim Area Hospital and Causeway Hospital sites. This adds 20p per hour for parking of less than 1 hour and 30p for parking of over 1 hour.

(< 1 hour parking: £1.10 up to £1.30; 1 – 2 hrs from £1.60 up to £1.90; 2 – 3 hrs from £2.00 up to £2.30).

(1.4) Are there any Section 75 categories (see list in 3.1) which might be expected to benefit from the intended policy/proposal?

All S75 categories are likely to benefit from safe, secure and suitably accessible car parking facilities. The Trust further recognises that the provision of safe, accessible car parking is not enough in itself and accepts that it has an obligation to manage such provision and take active steps to prevent abuse of such provision by others – Disability Discrimination Act 1995 refers.

This proposal is subject to a 12 week public consultation and consultees will include representatives from the Section 75 equality categories.

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

The Trust

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

- Feedback from consultation process may impact on implementation.
- Any increase in car parking charges could potentially lead to an increase in inappropriate parking on hospital sites due to the demand for free parking spaces.

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

Internal stakeholders: DoH, HSCB, NHSCT, other HSC Trusts, LCG, Staff, Trade Unions and Professional Bodies etc.

External stakeholders: The local population i.e. service users, patients and clients, relatives, as well as other organisations e.g. the public sector, independent sector, voluntary and community groups, Section 75 representative groups and advocates, MLAs etc. (This list is not intended to be exhaustive).

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

- Change or Withdrawal of Services: Revised Guidance on Roles and Responsibilities – DHSSPSNI – November 2014.
- Trust's Equality Scheme which incorporates the Trust's Human Rights obligations and disability duties.
- ECNI Guide on Section 75 and Budget.
- NHSCT 2017/18 Savings Plan.
- UN Convention on the Rights of Persons with Disabilities.
- Human Rights Act 1998.
- DHSSPSNI - Policy for Car Parking - Provision and Management in the Health and Social Care Sector (June 2012).

(2) Available evidence

Evidence to help inform the screening process may take many forms. What evidence/information (both qualitative and quantitative) have you gathered to inform this policy? Specify details for relevant Section 75 categories.

Details of evidence/information

A full Equality Impact Assessment was completed and consulted on by the NHSCT in 2009 prior to the introduction of visitor car parking charges.

The parking tariffs at the acute hospitals have not been increased for four years and the permutation below sets out how much revenue would have been generated with a 20% increase on tariffs at both sites.

This adds 20p per hour for parking of less than 1 hour and 30p for parking of over 1 hour (< 1 hour parking: £1.10 up to £1.30; 1 – 2 hrs from £1.60 up to £1.90; 2 – 3 hrs from £2.00 up to £2.30).

SECTION 75 GROUP	NORTHERN AREA POPULATION (TOTAL POPULATION 426,965) (2011 Census)
Gender	Female 50.99% Male 49.01%
Age	0 -15 16-39 40-64 65-84 85+ 20.81% 31.63% 32.36% 13.46% 1.74%
Religion	Protestant 56.44% Roman Catholic 29.07% Not Known 14.44%
Political Opinion	Not collected
Marital Status	Single 30.63% Married 57.60% Not Known 11.77%
Dependent Status (based on 158,520 households)	Households with dependent children 36.40%
Disability (based on 158,520 households)	Household with one or more persons with a limiting long term illness 38.61%
Ethnicity	Black African – 0.02% Irish Traveller – 0.05% Bangladeshi – 0.01% Pakistani – 0.04% Black Caribbean – 0.01% Mixed Ethnic Group– 0.18% Chinese – 0.23% White – 99.29% Indian – 0.09% Not Known – 0.05% Other Black – 0.01%
Sexual Orientation	Estimated 10% of population is LGB equates to estimated 168,527 of the NI population i.e. possibly one in 10 in terms of clientele/service user– data source Rainbow Project July 2008

(3) Needs, experiences and priorities

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

The proposed uplift by **20%** will impact on service users - patients, relatives, carers and visitors/service users who choose to use pay car parking on Antrim Hospital and Causeway Hospital sites.

Category	Needs, experiences and priorities Census 2001 by Section 75 Groups NORTHERN AREA POPULATION (426,965)	
	Service users	Staff
Gender	As highlighted in the previous EQIA the Trust is mindful of the potential for adverse effect on S75 equality categories in particular older people, disabled people and single parents in terms of lower income levels. As such the Trust will continue to adhere to the Regional Exemption Policy. Therefore the proposed increase will not affect anyone who is eligible for free or concessionary parking under the DHSSPSNI Policy for Car Parking Provision and Management in the HSC Sector.	Not applicable as there is free car parking available for staff who work on the sites
Age	As highlighted in the previous EQIA the Trust is mindful of the potential for adverse effect on S75 equality categories in particular older people, disabled people and single parents in terms of lower income levels. As such the Trust will continue to adhere to the Regional Exemption Policy. Therefore the proposed increase will not affect anyone who is eligible for free or concessionary parking under the DHSSPSNI Policy for Car Parking Provision and Management in the HSC Sector.	
Religion	N/A	

Political Opinion	N/A	
Marital Status	As highlighted in the previous EQIA the Trust is mindful of the potential for adverse effect on S75 equality categories in particular older people, disabled people and single parents in terms of lower income levels. As such the Trust will continue to adhere to the Regional Exemption Policy. Therefore the proposed increase will not affect anyone who is eligible for free or concessionary parking under the DHSSPSNI Policy for Car Parking Provision and Management in the HSC Sector.	
Dependent Status	As highlighted in the previous EQIA the Trust is mindful of the potential for adverse effect on S75 equality categories in particular older people, disabled people and single parents in terms of lower income levels. As such the Trust will continue to adhere to the Regional Exemption Policy. Therefore the proposed increase will not affect anyone who is eligible for free or concessionary parking under the DHSSPSNI Policy for Car Parking Provision and Management in the HSC Sector.	
Disability	In previous consultations the main issues raised by disabled representatives were around the availability and access to spaces in the car parks. In terms of the provision of car parking for disabled people, a proportion of parking spaces must be set aside in line with Health Estates Guidance.	
Ethnicity	N/A	
Sexual Orientation	N/A	

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

The Trust's proposal to temporarily increase car park charges was consulted on from 24 August to 5 October 2017. During the consultation period the Trust held five locality engagement meetings in each of the four Trust localities to engage directly with service users, carers, the public and local representatives. A consultation outcome report, detailing the consultation process and feedback received is now available on the Trust website.

The purpose of the consultation is to obtain the views and opinions of the public and the stakeholders on a permanent increase in car park charges. The 12 week consultation period will allow members of the public/stakeholders to challenge the Trust on its proposal and outcome of this S75 screening.

(4) Screening Questions

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

(4.1) What is the likely impact of equality of opportunity for those affected by this policy/proposal, for each of the Section 75 equality categories?

Section 75 category	Details of policy/proposal impact		Level of impact? Minor/major/none
	Services Users	Staff	
Gender	Minor	N/A	None
Age	Minor	N/A	None
Religion	None	N/A	None
Political Opinion	None	N/A	None
Marital Status	Minor	N/A	None
Dependent Status	Minor	N/A	None
Disability	Minor	N/A	None

Ethnicity	None	N/A	None
Sexual Orientation	None	N/A	None

(4.2) Are there opportunities to better promote equality of opportunity for people within Section 75 equality categories?	
Section 75 category	Please provide details
Gender	As highlighted in the previous EQIA the Trust is mindful of the potential for adverse effect on S75 equality categories in particular older people, disabled people and single parents in terms of lower income levels. As such the Trust will continue to adhere to the Regional Exemption Policy. Therefore the proposed increase will not affect anyone who is eligible for free or concessionary parking under the DHSSPSNI Policy for Car Parking Provision and Management in the HSC Sector.
Age	As above
Religion	N/A
Political Opinion	N/A
Marital Status	As above
Dependent Status	As above
Disability	As above
Ethnicity	N/A
Sexual Orientation	N/A

(4.3) To what extent is the policy/proposal likely to impact on good relations between people of different religious belief, political opinion or racial group? minor/major/none		
Good relations category	Details of policy/proposal impact	Level of impact Minor/major/none
Religious belief	On the basis of the information available to date, it is not envisaged that proposed increase of car parking charges at acute hospital sites would have any impact on terms of good relations.	None
Political opinion	As above	None
Racial group	As above	None

(4.4) Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?	
Good relations category	Please provide details
Religious belief	As detailed above the implementation of this proposal will have no adverse impact on the promotion of good relations. The Trust is committed to the promotion of good relations – its Good Relations Statement is as follows - “We are committed to ensuring that our staff feel comfortable at work and everyone feels welcome when using our services. We will not tolerate sectarianism or racism in any form neither by staff or service users.”
Political opinion	As above.
Racial group	There is no evidence that this proposal will have an adverse impact on persons of a different racial group. The Trust spends significant resources in ensuring its services are accessible by the whole community and is one of the biggest users of the DHPSSNI Regional Interpreting Service. Similarly, the Trust translates information into a range of formats for those whose first

	language is not English.
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(5) Consideration of Disability Duties

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

This proposal will involve ongoing engagement with those affected. The Trust will take into account individual extenuating circumstances and work in partnership with individuals and TUs to alleviate any potential impact for people with disabilities.

The Trust will ensure relevant staff receive disability equality training and will adhere to its obligations under the Disability Discrimination Act 1955 and its commitments in the Disability Action Plan.

The Trust constantly reviews the number of disabled parking spaces available. Parking enforcement is in place and unauthorised users of disabled parking bays will be issued with a fixed penalty notice.

(6) Consideration of Human Rights

(6.1) Does the policy/proposal affect anyone’s Human Rights?
Complete for each of the articles

Article	Positive impact	Negative impact = human right interfered with or restricted	Neutral impact
Article 2 – Right to life			X
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment			X
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour			X
Article 5 – Right to liberty & security of person			X
Article 6 – Right to a fair & public trial within a reasonable time			X
Article 7 – Right to freedom from retrospective criminal law & no punishment without law			X
Article 8 – Right to respect for private & family life, home and correspondence.			X
Article 9 – Right to freedom of thought,			X

conscience & religion			
Article 10 – Right to freedom of expression			X
Article 11 – Right to freedom of assembly & association			X
Article 12 – Right to marry & found a family			X
Article 14 – Prohibition of discrimination in the enjoyment of the convention rights			X
1 st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			X
1 st protocol Article 2 – Right of access to education			X

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

This will impact on external Service Users and Visitors. There will be no impact on internal stakeholders.

The Trust is committed to the safeguarding and promotion of Human Rights in all aspects of its work. The Human Rights Act 1998 gives effect in UK Law to the European Convention on Human Rights and requires legislation to be integrated so far as possible in a way that is compatible with the convention rights and makes it unlawful for a public body to act incompatibly with the convention rights.

The Trust will continue to provide on-going training and staff awareness on human rights.

(7) Screening Decision

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

Major impact	
Minor impact	
No impact	X

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

Yes	
No	X

(7.3) Do you think the policy/proposal should be subject to and Equality Impact Assessment (EQIA)?

Yes	
No	X

(7.4) Please give reasons for your decision and detail any mitigation considered.

The Trust considers that there will be sufficient mitigation to alleviate potential adverse impact.

There are exemptions in place for the following groups

- Cancer patients
- Renal patients;
- Next of kin of those in ICU;
- Next of kin of neonatal patients;

The Ward Sister has discretion to issue vouchers to patients for free parking in certain circumstances. These include:

- A patient who has come in for a routine appointment and been given bad news.
- A patient who has an unplanned admission.
- A patient who has had a procedure and has been under sedation e.g. day surgery.
- Parent / guardians who have been asked to sit with a child

The Trust believes that there is no evidence to suggest that the implementation of this proposal will have a major adverse impact on any of the equality categories. Car parking charges are already in place and the parking tariffs at the acute hospitals have not been increased for four years. Exemptions for car parking charges continue to apply as detailed above.

(8) Monitoring

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

The Trust will continue to monitor the impact and ensure that it is nothing more major than initially anticipated.

Monitoring mechanisms will be implemented to monitor for possible unforeseen adverse impact. The Trust will also take account of information or feedback provided by stakeholders during the 12 week consultation period.

The Trust intends to review this equality screening template at the end of the public consultation phase to ensure it is updated to reflect any feedback from stakeholders which may impact on the final decision.

Approved Lead Officer: **Maire Bermingham**

Position: **Assistant Director Corporate Support Services**

Date: **23 March 2018**

Policy/proposal screened by: **Maire Bermingham**