



Northern Health  
and Social Care Trust

# Screening Outcome Report

June 2018

## Introduction

Section 75 of the Northern Ireland Act 1998 requires the Trust, when carrying out its functions in relation to Northern Ireland, 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.

Without prejudice to its obligations above, 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 Equality Scheme outlines how we propose to fulfil our statutory duties under Section 75. Within the Scheme, the Trust gave a commitment to apply the screening methodology below to all new and revised policies and where necessary and appropriate to subject new policies to further equality impact assessment.

## Screening methodology

When screening policies/proposals the Trust will consider,

- What is the likely impact of equality of opportunity for those affected by this policy/proposal, for each of the Section 75 equality categories?
- Are there opportunities to better promote equality of opportunity for people within Section 75 equality categories?
- To what extent is the policy/proposal likely to impact on good relations between people of different religious belief, political opinion or racial group?
- Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?

In keeping with the Trust's commitments in its Equality Scheme the Trust has applied the above screening criteria to new policies and proposals. The screening process is used to identify which policies/proposals are likely to have an impact on equality of opportunity or good relations. Screening assesses the likely impact as major, minor or none.

If it is decided that a policy/proposal is likely to have significant/major issues relating to equality, it is then necessary to carry out a more detailed exercise called an equality impact assessment (EQIA).

This screening report outlines the screening outcomes from 1 April 2018 - 30 June 2018.

## Communication and Engagement

In order to carry out our functions there is a need to continue to effectively engage and work collaboratively with a wide range of stakeholders including Trust staff, Trade Unions, service users, carers, commissioners, primary care, public representatives and independent providers.

The Trust is committed to promoting personal and public involvement in all its activities. The development of new policies and proposals will be supported by effective engagement processes to ensure that staff, service users and all interested parties are fully involved. Planning for, and delivering safe, clinically effective and cost effective services requires close collaboration at many levels.

If you have any queries about this document, and its availability in alternative formats (including Braille, disk and audio cassette, and in minority languages to meet the needs of those who are not fluent in English) then please contact:

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## Outcome of Screening

The screening outcomes are outlined below. Four possible outcomes are recorded:

1. The policy has been '**screened in**' for equality impact assessment;
2. The policy has been '**screened out**' with mitigation or an alternative policy proposed to be adopted;
3. The policy has been '**screened out**' without mitigation or an alternative policy proposed to be adopted.
4. The policy will be **subjected to ongoing screening**. For more detailed strategies or policies that are to be put in place through a series of stages, screening should be considered at various times during implementation.

Description of Policy or Proposal	Screening Outcome	Reason for reaching Screening Outcome
<p><b>NHSCT/18/1192</b></p> <p><b>Locum and Agency Procedure for Medical and Dental Staff</b></p> <p>This document is in accordance with the HSS Executive Circular HSS (TC8) 2/98 and the Code of Practice for the appointment and employment of locum doctors. It details the operational procedure for the procurement and recruitment of Medical and Dental locum and agency staff within the NHSCT, including the role and responsibilities of the target audience.</p> <p>These procedures aim to:</p> <ul style="list-style-type: none"> <li>• Identify the processes involved in filling a Trust Medical/ Dental vacancy</li> <li>• Define who is responsible at each stage of the process</li> <li>• Ensure compliance with the Code of Practice on the appointment and employment of all locum doctors/dentists</li> <li>• Act in accordance with the Trust Medical/Dental Agency Contract provisions.</li> </ul>	Screened Out	<p>This operational procedure has been developed, in response to HSS Executive Circular (TC8) 2/98, to ensure that there are robust and consistent processes in place to support the procurement of agency and recruitment of locum Medical and Dental staff within the NHSCT. There is no evidence to suggest that the implementation of this policy will adversely impact on any group outlined in S75.</p>
<p><b>NHSCT/18/1193</b></p> <p><b>Telecommunications Policy</b></p> <p>The Telecommunication Policy and guidance has been created to ensure the Trust is able to deploy and manage Telecommunication and Video Conferencing Services throughout the Trust in a controlled and agreed manner.</p> <p>The purpose of this policy is to ensure that there is a consistent approach in the provision and use of telecommunication and video conferencing devices and that internal controls are in place and adhered to in respect of the ordering, issue, use and recovery of costs associated with these devices.</p>	Screened Out	<p>The policy has been produced to ensure that staff understand their own and management responsibilities in connection with the deployment, procurement, maintenance and monitoring of telecommunications services. The policy will be applied consistently to all staff. There is no evidence to suggest that the implementation of this policy will adversely impact on any group outlined in S75.</p>

<p><b>NHSCT/18/1194</b></p> <p><b>Whistleblowing Policy - Your Right to Raise Concerns</b></p> <p>This Policy provides a procedure for all staff of the Trust, including permanent, temporary and bank staff, staff in training working within the Trust, independent contractors engaged to provide services, volunteers and agency staff who have concerns where the interests of others or of the organisation itself are at risk.</p>	Screened Out	<p>The Public Interest Disclosure (Northern Ireland) Order 1998 provides employees with protection against victimisation should they reasonably and in good faith report such concerns (“blow the whistle”). This policy reassures staff that it is safe and acceptable to speak up. All HSC staff have a moral duty to pass on any concerns to someone who can deal with it. This policy is based on model template for Whistleblowing received under DHSSPS circular HSS(F) 07/2009 and the Agenda for Change handbook. Consultation has taken place with senior HR management and with Trade Union side. There is no evidence to suggest that the implementation of this policy will adversely impact on any group outlined in S75</p>
<p><b>NHSCT/18/1195</b></p> <p><b>Humidified High Flow Nasal Cannula / Tracheal interface, in the adult and set up of AIRVO 2</b></p> <p>This is a Clinical policy/guideline which is systematically developed to provide recommendations which assist health care professionals and patients in making decisions about the appropriate treatment and care of people with specific diseases and conditions. It is based on the best available evidence. It will help health care professionals in their work, but does not replace their knowledge and skills.</p>	Screened Out	<p>As this policy is clinical and is applicable to all categories covered within S75. There is no evidence to suggest that that the implementation of this policy will adversely impact on any group outlined in section 75</p>
<p><b>NHSCT/18/1196</b></p> <p><b>Core Child Protection policy and Procedures (Regional) SBNI</b></p> <p>This policy directs staff to the Safeguarding Board for Northern Ireland (SBNI) which has issued its regional core child protection policy and procedures which are on an E-based platform available at: <a href="http://www.proceduresonline.com/sbni/">http://www.proceduresonline.com/sbni/</a></p>	Screened Out	<p>Regional screening has been undertaken by SBNI. There is no evidence to suggest that that the implementation of this policy will adversely impact on any group outlined in section 75</p>

<p><b>NHSCT/18/1197</b></p> <p><b>Clinical Coding Manual</b></p> <p>This document has been published with the intention of promoting good practice and consistency of information produced during the clinical coding process in the NHSCT. It is based on guidance from NHS Digital and has been designed to incorporate the requirements of the Data Accreditation process to ensure information produced during the coding process is accurate and adheres to local and national policies.</p> <p>This policy sets the boundaries within which action will take place, and reflects the philosophy of the service. This policy should be supported by local procedures which are designed to accomplish specific tasks in specified chronological order.</p> <p>This Policy and associated procedures conform to national requirements already in existence and other local procedures which affect the coding process, such as patient administration, patient discharge, clinical record documentation, clinical record flow and filing, storage of records.</p>	Screened Out	This is a manual for the Clinical Coding Department to ensure the accuracy of information and adherence to local and national policies relevant to the coding process. There is no evidence to suggest that that the implementation of this policy will adversely impact on any group outlined in section 75.
<p><b>NHSCT/18/1198</b></p> <p><b>Data Quality Policy</b></p> <p>The availability of complete, comprehensive, relevant, accurate and timely data is essential in supporting service user care, clinical and social care governance, management and accountability.</p> <p>Service users benefit from high quality data by receiving better and safer care if their data is accurate and up to date. High quality data means that whenever a service user requires care, the person caring for them has access to complete, accurate and up to date records.</p> <p>Poor data quality jeopardises efficiency and undermines the value of business intelligence on which the Trust relies to make key decisions. It has the potential to reduce levels of confidence in the Trust and its staff.</p>	Screened Out	As this policy is related to the management of information and is applicable to all service users. There is no evidence to suggest that that the implementation of this policy will adversely impact on any group outlined in section 75

<p><b>NHSCT/18/1199</b></p> <p><b>Obstetric Anal Sphincter Injuries (OASIS)</b></p> <p>This is a clinical policy covering the identification, management, surgery technique and postoperative care of sphincter injuries occurring in women as a result of childbirth</p>	Screened Out	<p>This is a Clinical guideline with systematically developed recommendations which assist health care professionals in making decisions about good clinical practice. It is based on the best available evidence. This policy is applicable to all women receiving such injuries as a result of childbirth. There is no evidence to suggest that that the implementation of this policy will adversely impact on any group outlined in section 75.</p>
<p><b>NHSCT/18/1200</b></p> <p><b>Ectopic Pregnancy and Pregnancy of Unknown Location Investigation</b></p> <p>This is a clinical policy covering ectopic and other pregnancies of unknown location. It is appropriate to women who are pregnant.</p>	Screened Out	<p>This is a Clinical guideline with systematically developed recommendations which assist health care professionals in making decisions about good clinical practice. It is based on the best available evidence. This policy is applicable to all women receiving such injuries as a result of childbirth. There is no evidence to suggest that that the implementation of this policy will adversely impact on any group outlined in section 75.</p>
<p><b>NHSCT/18/1201</b></p> <p><b>Gateway to Children’s Social Work Service Operational Policy</b></p> <p>Operational policy related to the management of referrals by the central Gateway social work team based at Antrim to ensure that a high quality service is provided from the initial contact, through the referral and interagency liaison, to the completion of an Initial Assessment using the UNOCINI framework</p>	Screened Out	<p>This is an operational policy specific to the management of referrals received by Gateway. Initial Assessment using the UNOCINI framework will identify any specific requirements to be addressed in relation to the 9 equality categories.</p>
<p><b>NHSCT/18/1202</b></p> <p><b>Hospital Diversion Nursing Team Operational Policy</b></p> <p>This is an operational policy that is applicable to nursing, medical, social work, allied health professionals and pharmacy staff working within the following Divisions:</p> <ul style="list-style-type: none"> <li>• Medicine &amp; Emergency Medicine</li> <li>• Community Care</li> <li>• Surgical &amp; Clinical Services</li> <li>• Women, Children &amp; Families.</li> </ul>	Screened Out	<p>The HDNT is a Trust wide nursing service. The aim of the service is to administer treatments to patients in their own homes, or a local clinic setting, to prevent an admission to hospital. They also facilitate earlier discharges from hospital. The teams are based in 4 localities and work 7 days/week from 08 45 – 22 45. There is no evidence to suggest that that the implementation of this policy will adversely impact on any group outlined</p>

<p>It will also apply to General Practitioners and Dalriada Urgent Care.</p>		<p>in section 75.</p>
<p><b>NHSCT/18/1203</b></p> <p><b>MCADD Family history (medium chain acyl coA dehydrogenase deficiency)</b></p> <p>This is a clinical related policy related to the collection of family history in respect of identified MCADD</p>	<p>Screened Out</p>	<p>This is a Clinical guideline with systematically developed recommendations which assist health care professionals in making decisions about good clinical practice. It is based on the best available evidence. There is no evidence to suggest that that the implementation of this policy will adversely impact on any group outlined in section 75.</p>
<p><b>NHSCT/18/1204</b></p> <p><b>Anaemia and Vitamin Supplementation in Pregnancy</b></p> <p>This is a clinical related policy related to the management of anaemia identified during pregnancy</p>	<p>Screened Out</p>	<p>This is a Clinical guideline with systematically developed recommendations which assist health care professionals in making decisions about good clinical practice. It is based on the best available evidence. There is no evidence to suggest that that the implementation of this policy will adversely impact on any group outlined in section 75.</p>
<p><b>NHSCT/18/1205</b></p> <p><b>Non Invasive Ventilation Use in the Adult Respiratory Wards</b></p> <p>This is a clinical policy outlining the use of non invasive ventilation in adult respiratory wards</p>	<p>Screened Out</p>	<p>This is a Clinical guideline with systematically developed recommendations which assist health care professionals in making decisions about good clinical practice. It is based on the best available evidence. There is no evidence to suggest that that the implementation of this policy will adversely impact on any group outlined in section 75.</p>
<p><b>NHSCT/18/1206</b></p> <p><b>Responding to the needs of children whose parents have mental health or substance misuse issues</b></p> <p>The aim of this operational guidance is to promote a collaborative approach to service delivery and effective communication between all relevant stakeholders where families are affected by mental health and substance misuse issues. It aims to ensure</p>	<p>Screened Out</p>	<p>The guidance is based upon the Social Care Institute of Excellence, SCIE Guide 30: Think child, think parent, think family: a guide to parental mental health and child welfare (SCIE, 2009). There is no evidence to suggest that the implementation of this policy will adversely impact on any group outlined in Section 75.</p>



the provision of support and intervention at an earlier stage thus promoting the welfare of children and enhancing the recovery of the adult. It should complement existing good practice arrangements.		
<p><b>NHSCT/18/1207</b></p> <p><b>Direct Payments - Staff Guidance</b></p> <p>This Guidance is intended to assist Health and Social Care Staff within the Surgical and Clinical Services, Mental Health, Learning Disability and Community Wellbeing and Women, Children and Families Directorates to implement the Direct Payments Scheme.</p>	Screened Out	The principles underpinning Direct Payments are choice, independence and flexibility. They allow individuals to take more control of their own lives by empowering them to make decisions as to whom they wish to provide the services at times that are convenient to them. There is no evidence to suggest that the implementation of this policy will adversely impact on any group outlined in Section 75.
<p><b>Additional funding for Community Hospitals - proposed workforce changes.</b></p> <p>Referrals to the rehabilitation beds come from secondary, primary and community care and they provide an essential element of the patient journey. Recent hospital reforms have reduced the lengths of stay within Acute facilities and together with the impact of demographic changes are placing increased demands on our current workforce. The purpose of this proposal is to provide additional senior nurse cover on at weekends and later into evening.</p>	Screened Out	Proposals and potential impact discussed with staff affected. Any mitigating factors which would prevent reasonable participation in the altered working pattern discussed and fully considered. There is no evidence to suggest that the implementation of this policy will adversely impact on any group outlined in Section 75.
<p><b>Reform of Pre-Assessment / Pre-Admission</b></p> <p>The Reform and Modernisation Programme (RAMP) Theatre modernisation workstream has reviewed processes for pre-assessment and pre-admission for patients booked for surgical procedures. This has identified improvements in the patient journey to reduce the number of short notice cancellations for procedure dates and improve the information flows and the patient experience.</p>	Screened Out	Proposals and potential impact discussed with staff affected. Any mitigating factors which would prevent reasonable participation in the altered working pattern discussed and fully considered. There is no evidence to suggest that the implementation of this policy will adversely impact on any group outlined in Section 75.

Screening Templates for any of the above are available from the Equality Unit as noted below.

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