Equality, Good Relations and



Completed and Signed Screening Templates are public documents posted on the Trust's website

- All policies / proposals require an equality screening
- Policy / Proposal authors / decision makers are responsible for Equality Screenings

Sect	Section 1: Information about the Policy / Proposal							
(1.1)	Name of the policy/proposal	Guidelines for the administration of Tuberculin PPD RT 23 SSI by Registered Nurses working in the occupational Health service.				s working		
(1.2)	Status of policy/proposal (please underli	ine)	Ne	ew	Exi	sting	<u>Revised</u>	
(1.3)	Department/Service Group: (please underline)	Corporate Services Group (Please specify Human Resources)	Nursing and User Experience	Un- scheduled and Acute Care	Surgery & Specialist Services	Specialist Hospitals & Women's Health	Children's Community Services	Adult Social & Primary Care
(1.4)	Description of the policy/ proposal? State the aims and objectives/key elements of the policy/proposal. Detail the changes the policy/proposal will introduce. How will the policy/proposal be communicated to staff /service users? Describe how the policy/proposal will be rolled out/put into practice e.g. will there be changes in working patterns / changes to how services will be delivered etc.	The policy phealth screet Trust. It also patients in horizontal This policy scodes of praprocedures This Policy France Trust. This Policy France Trust. It also patients in horizontal Trust. This Policy France Trust.	nas been develong the latest seen development of the latest seen review of the reading and the latest seen review of the reading and the latest seen review of the reading and the reading and the latest seen review of t	rocedures to contain programmers who contrains who are at risk in conjunction istration of me on and screen wed and revise	arry out manto nme for health act our service of exposure with trust wid dicines including of Tuberco	oux testing as particular care workers es who are in count to TB. e medicines maing Occupation of the count to the count	part of the occu employed by th linical contact w anagement pol nal standard op	ipational ne Belfast vith icies and erating

	This policy has been reviewed and consulted within the Occupational health service, and all relevant stakeholders including the Trust TB Committee.
	Aims & Objectives
	This policy aims to ensure safe practice of registered nurses working within the Occupational Health Service when carrying out Mantoux testing.
	The policy aims to ensure nursing and medical staff have a clear understanding of their role and responsibilities with reference to these guidelines.
	Dissemination
	The policy will be available for all staff to access via the Belfast trust Loop as well as locally within the Occupational Health service.
	A copy of these guidelines will be disseminated to all nursing and medical staff within the Occupational Health Service on approval.
	Review and Monitoring
	A record of all nursing and medical staff that operate within these guidelines will be maintained.
	Policy will be reviewed and updated prior to next review date in 2028 or sooner in response to any updates/changes in Green book, UKHSA, Nice guidelines and other sources as listed in references.
	Monitoring and review of incidents/ Serious Adverse Incidents, review of complaints, service user feedback, and audits. Audits will be registered with the Quality Improvement Team, outcomes reported and an action plan prepared, where appropriate.
(1.5) Who owns the policy/proposal? Where does it originate? For example: DoH / HSCB	Belfast HSC Trust, Directorate of Human Resources and Organisational Development
(1.6) Who are the main stakeholders	

offeeted (Internal and External)?	All potential and current staff/employees of Belfast HSC trust, including organisations
affected (Internal and External)? For example: actual or potential service	who access occupational health advice from the Belfast Trust occupational health
·	,
users, carers, staff, other public sector	service, including Queen's University Belfast, NIAS etc.
organisations, trade unions, professional	
bodies, independent, voluntary or	
community sector or others.	
(1.7) Provide details of how you involved	Stakeholders were involved through consultation. The policy was consulted with human
stakeholders, views of colleagues,	resources, Occupational Health medical and nursing teams and trust TB committee
service users, staff side or other	which includes infectious disease consultant, infection prevention control, health and
stakeholders when screening this	safety team.
policy/proposal.	
(1.8) Other policies/strategies with a	BHSCT General Health and safety policy (2018) TP 50/08
bearing on this policy/proposal	BHSCT Hand hygiene policy (2017) SG 34/09
For example: internal or regional policies	Reporting of Injuries, Disease and Dangerous Occurrences Regulation
	(RIDDOR) Policy.pdf
	Screening and Vaccination of Staff Against Infectious Diseases in the Workplace
	- Guidelines on.pdf
	Anaphylactic Reactions - Policy on the Recognition and Management of.pdf
	Aseptic Non Touch Technique (ANTT).pdf
	Clinical record keeping.pdf
	Consent-Obtaining consent for examination, treatment or care in adults and
	<u>children.pdf</u>
	Tuberculosis in Acute Settings - Management of.pdf
	Community Medicines Code policy Appendix 1 - Community Medicines Code
	guidance.pdf
	Community Medicines Code policy Appendix 1 - Community Medicines Code
	guidance.pdf
	Emergency oxygen in adults - Policy for the prescription and administration of pdf
	Injectable Medicines Code Policy.pdf
	Injectable Medicines Guide Policy.pdf
(1.9) Are there any factors that could	

contribute to/detract from the	None
intended aim/outcome of the	
policy/proposal?	
For example: Financial, legislative	

Section 2: Classification of the Policy / Proposal

- The purpose of this Section is to consider the policy/proposal in terms of its relevance and likely impact (actual/potential) on equality of opportunity, disability duties, good relations and human rights.
- To determine the impact (actual and potential) of a policy/procedure on equality of opportunity, disability duties, good relations and human rights please complete the screening questions at 2.1 2.6.

Scr	eening Questions	Yes	No
(2.1)	Is there an impact on Equality of Opportunity for those affected by this policy, for each of the S75* equality categories?		X
(2.2)	Are there better opportunities to promote equality of opportunity for people within the S75 categories?		X
(2.3)	Does the policy impact upon Good Relations between people of a different religious belief, political opinion or racial group?		X
(2.4)	Are there opportunities to better promote good relations between people of a different religious belief, political opinion or racial group?		x
(2.5)	Are there opportunities to encourage Disabled People to participate in public life and promote positive attitudes toward disabled people? (Disability Duties)		x
(2.6)	Does the policy/proposal impact on Human Rights?		х
Ethni	equality categories include : Age, Dependent Status, Disability, Gender, Marital Status city, Religion, Political Opinion and Sexual Orientation.		

 If you have answered Yes to <u>any</u> of the above questions complete Sections 3 - 9. <u>OR</u>
• If you have answered No to <u>all</u> of the above questions the policy may be screened out - go to Screening Statement at 2.7.
N.B: All Staff must complete their mandatory equality, good relations and human rights training once every five years. This can be booked via HRPTS or completed online at www.hsclearning.com . The online programme is called 'Making a Difference'. Belfast Trust Staff can also access a suite of equality and diversity training including: disability awareness, human rights and embracing diversity in HSC – please contact Lesley.Jamieson@belfasttrust.hscni.net for more information.
(2.7) Screening Statement :
This policy / proposal is 'screened out' on the basis that: (please tick)
It is a purely clinical or technical nature and has <u>no relevance</u> or impact (actual / potential) in terms of equality of opportunity , disability duties, good relations and human rights.
X It aims to standardise practice and / or achieve best practice based on current evidence.
X Reasonable adjustments will be made for patients/service users as required including any information e.g. leaflets / letters in accessible/alternative formats
NB: Accessible/ Alternative formats can include, for example, information in easy to read formats or audio formats when the patient/service user has a learning disability or is visually impaired. For advice on making information accessible and inclusive for disabled patients/service users, click Making Communication Accessible guidance . In addition, if a patient/service user does not speak English as his/her first language, an interpreter / sign language interpreter should be provided and written information should be translated as appropriate.
Any other reasons: Please detail.

Approved Lead Officer:	Caroline Parkes	Countersigned by*:	Estalla Basta
Position:	Occupational Health	Equality Manager:	Estella Dorrian
Date:	manager 31/03/2023	Date:	3 rd August 2023
	01/00/2020		

Please sign / date and forward to the Equality and Planning Team for consideration - <u>Lesley.Jamieson@belfasttrust.hscni.net</u>.

Section 3: Consideration of Equality and Good Relations Issues and Evidence Used

This section records the quantitative and qualitative data you have used to consider equality and good relations issues including:

- The assessment of impact on staff and service users
- The identification of mitigation factors to reduce/remove any adverse impact
- Opportunities to better promote equality of opportunity

Evidence to help inform the screening process may be quantitative and qualitative. For example: previous consultations and equality impact assessments (eqias), statistics, research, complaints, feedback, referrals, grievances, inspection reports, focus groups, user groups etc.

(3.1) Quantitative and Qualitative Data: Service Users

SERVICE USERS					
Equality Category	Service Users	Quantitative Data (2011 Census Data unless otherwise stated)	Qualitative Data (Needs, Experiences, Priorities)		

^{*}Equality screenings are completed with information provided by the policy / proposal author subject to advice and assistance provided by the Trust's Equality Managers.

		Belfast / Castlereagh population	Service users affected %
1. Age	0-15 16-24 25-34 35-44 45-54 55-64 65+ Caring for a child	22% 11% 12% 14% 14% 12% 15%	70
Dependent Status	dependant older person/ person with a disability	usually resident population provide unpaid care - 36% of whom are male and 64% are female	
3. Disability	Yes No	21% 79%	
4. Gender	Female Male	49% 51%	
5. Marital Status	Married/Civil P'ship Single Other/Not known	34.21% 46.6% 19.19%	

6. Race Ethnicity	White Black/Minority Ethnic	98% 2%	
7. Religion	Roman Catholic	41%	
	Presbyterian Church of Ireland Methodist Other Christian	42%	
	Buddhist Hindu Jewish Muslim Sikh Other None	17%	
8. Political Opinion Based on Council seats on Belfast City Council, October 2017. Excludes Castlereagh	DUP SF SDLP UUP APNI Green PBP IND PUP	Based on Council seats on Belfast City Council * Excludes Castlereagh	

		13 19 4 6 8 1 1 5	
9. Sexual Orientation	Opposite sex Same sex Same and Opposite sex Do not wish to answer /Not known	Estimated 6- 10% of persons identify as lesbian, gay, bisexual Source: 2012 report by Disability Action & Rainbow Project	

(3.3) Quantitative and Qualitative Data: Staff

This information will be provided together with analysis and advice by the Employment Equality Team in the Human Resources department.

Quantitative Data: For staff data please contact Martin McGrath on 028 95 048353 / martin.mcgrath@belfasttrust.hscni.net

Qualitative Data: Consideration will be given to the different needs, experiences and priorities of each of the categories in relation to the policy / proposal.

Should any equality / modernisation related issues arise they will be managed through the Organisational Change Framework. Click here for Framework

When organisational / policy change is necessary, regardless of whether it is a permanent or temporary change, the Trust is committed to treating staff fairly and equitably. Staff can be assured that the change process will be managed. This includes consultation with staff and the opportunity for staff to discuss in one to one meetings, any adverse equality impacts resulting in changes to their employment.

This framework also works alongside other Human Resources policies including for example the Disability and Reasonable Adjustment Framework, the Work Life Balance Policy and Procedure, the Recruitment and Selection Policy and Procedure and Agenda for Change Terms and Conditions Handbook.

Equality	· · · · · · · · · · · · · · · · · · ·		tative Data	Qualitative Data
Category		Belfast	Staff affected	
		Trust	by the	
		workforce	Policy/Proposal	
		(@January	%	
1.	16-24	2019) 4%		
''	25-34	24%		
Age	35-44	25%		
	45-54	26%		
	55-64	18%		
	65+	3%		
2.				
Dependant	Dependants	20%		
Status	No Dependants	16%		
	Not known	64%		

3.			
Disability	Yes No Not known	2% 63% 35%	
4.			
Gender	Female Male	77% 23%	
5.			
Marital Status	Married/ Civil P'ship Single Other/ Not known	52% 32% 16%	
6. Race			
a) Ethnicity	BME White Not Known	4% 72% 25%	
b) Nationality	GB Irish Northern Irish Other Not known	18% 11% 2% 1% 68%	

7. Religion a) Community Background	Protestant Roman Catholic Neither	40% 49% 11%			
b) Religious Belief	Christian Other No religious belief Not known	28% 1% 9% 62%	 		
8. Political Opinion * 2011 Assembly election	Broadly Nationalist Broadly Unionist Other Do not wish to answer/ Unknown Not known	6% 7% 8% 79%			
9. Sexual Orientation	Opposite sex Same sex or both sexes Do not wish to answer	41% 2% 57%			

Section 4: Consideration of Impacts, Mitigation, Alternative Policies / Proposals

Given the **evidence** gathered in Section 3 please identify for each of the **nine equality categories** the level **of impact, mitigation measures** and **alternative** policies / proposals that better **promote equality of opportunity**.

(4.1) SERVICE USERS				
Equality Category	Le	vel of Imp	act	Mitigation Measures and Alternative Policies or Actions that might lessen the severity of the equality impact
	Major	Minor	None	(where Major or Minor Impact identified)
Age				
Dependant Status				
Disability				
Gender				
Marital Status				
Race (Ethnicity)				
Religion				
Political Opinion				
Sexual Orientation				
Multiple Identity e.g. disabled minority ethnic people or young Protestant men.				

Equality Category		Level of Impact			Mitigation Measures and Alternative Policies or Actions that might lessen the
		Major	Minor	None	severity of the equality impact (where Major or Minor Impact identified)
					(where Major or Millor Impact Identified)
Age					
Dependa	nt Status				
Disability	,				
Gender					
Marital St	atus				
Race	Ethnicity				
	Nationality				
Religion	Community Background				
	Religious Belief				
Political (Opinion				
Sexual O	rientation				
Multiple Identity e.g. female staff with caring responsibilities					

Section 5: Good Relations							
Based on the evidence collect	cted in Sec	ction 3 &	4:				
 To what extent is the p racial group? 	olicy/propo	osal likely	to impac	t Good Relations i.e. between people of different religious belief, political opinion or			
 Are there any addition 	al measu	res that c	ould be s	uggested to ensure the policy or proposal promotes Good Relations?			
Good Relations category	Lev	el of imp	act	Mitigation Measures and Alternative Policies or Actions that might lessen the severity of the equality impact			
	Major	Minor	None	(where Major or Minor Impact identified)			
Religious belief							
Political opinion							
Racial group							
- '							
Section 6: Disability Du	ties						
How does the policy / proposa	al:						
 encourage disabled p 	eople to p	participat	e in				

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promote positive attitudes towards disabled people?

Consider what **other measures** you could take to meet these **duties**.

For example, have staff received disability equality training.

Section 7: Human Rights

Belfast Health and Social Care Trust is committed to providing the highest attainable standard of health within our resources.

Does the policy/proposal affect human rights in a positive or negative way?

Article	Positive impact	Negative impact (Human Right has been interfered with or restricted)	Neutral impact
A2: Right to life			
A3: Right to freedom from torture, inhuman or degrading treatment or punishment			

A4: Right to freedom from slavery, servitude & forced or co						
A5: Right to liberty & security of person	•					
A6: Right to a fair & public trial within a reasonable time						
A7: Right to freedom from retrospective criminal law & no p	ounishment without law					
A8: Right to respect for private & family life, home and corre	espondence.					
A9: Right to freedom of thought, conscience & religion						
A10: Right to freedom of expression						
A11: Right to freedom of assembly & association						
A12: Right to marry & found a family	A12: Right to marry & found a family					
A14: Prohibition of discrimination in the enjoyment of the co						
1st protocol Article 1 – Right to a peaceful enjoyment of pos	ssessions & protection of					
property						
1 st protocol Article 2 – Right of access to education						
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.						

Section 8: Screening Decision	Major	Minor	None
(8.1) How would you categorise the impacts of this policy / proposal? (Please underline one category)	(Screened In for an Equality Impact Assessment)	(Screened Out with mitigation)	(Screened Out)

(8.2) If you have identified you considered to add	any impact, what mitigation have dress this?			
(8.3) Do you consider the particle subjected to on-going	policy/proposal needs to be g screening?	Yes	No	Reasons
an Equality Impact A NB: A full Equality Impact A confined to those policies of implications for equality of rights. Section 9: Monitoring (9.1) Please detail how you	Assessment (EQIA) is usually or proposals considered to have major opportunity/good relations/human	Yes	No	Reasons
. , , ,	lations, disability duties and			
Equality screenings are of Trust's Equality Manager Please note that Comple	completed with information providedrs. ted and Signed Screening Templates	l by the po	olicy / pro	Lesley.Jamieson@belfasttrust.hscni.net. oposal author subject to advice and assistance from the nents and are posted on the Trust's website.
Approved Lead	Caroline Parkes	Counters	signed by	y:

Officer			
	Occupational Health manager		
Position	-	Equality Manager	
	31/03/2023		
Date		Employment Equality Manager	