

# Equality, Good Relations and Human Rights SCREENING TEMPLATE

**\*\*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

Section 1: Information about the Policy / Proposal							
<b>(1.1) Name of the policy/proposal</b>	Belfast Health and Social Care Trust Policy and Procedural Arrangements relating to The Control of Noise at Work						
<b>(1.2) Status of policy/proposal</b> <i>(please underline)</i>	New		Existing			<u>Revised</u>	
<b>(1.3) Department/Service Group:</b> <i>(please underline)</i>  <b>Medical Directorate</b>	Corporate Services Group <i>(Please specify)</i>	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
<b>(1.4) Description of the policy/ proposal?</b> 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.	<p>This policy &amp; procedural arrangement is designed to provide managers and staff with clear guidelines and outline their responsibilities to manage the risk associated with the control of noise at work.</p> <p>Objectives:</p> <ul style="list-style-type: none"> <li>• To comply with legislative requirements as defined in the Control of Noise at Work Regulations (NI) 2006.</li> <li>• To define the term “noise at work”</li> <li>• To ensure that suitable controls are in place for the provision of working in a noisy area.</li> <li>• To provide further sources of information, guidance and advice.</li> </ul> <p>This Policy is required to be implemented by all Directorates. All managers and staff are required to comply with this Policy, in particular those individuals and Departments with specific responsibilities, as detailed in Section 3.</p>						

	Implementation of this Policy will be monitored by completion of the BRAAT Noise at Work S Details on specific monitoring responsibilities are detailed in Sections 3. The Trust's Health & Safety Management System will be monitored through BRAAT Scoring returns, validation visits, compliance with the Health & Safety Controls Assurance Standards and by Internal/External Audit
<b>(1.5) Who owns the policy/proposal?</b> Where does it originate? For example: DoH / HSCB	Health and Safety Legislation
<b>(1.6) Who are the main stakeholders affected (Internal and External)?</b> For example: actual or potential service users, carers, staff, other public sector organisations, trade unions, professional bodies, independent, voluntary or community sector or others.	All managers and staff and contractors are required to comply with this Policy, in particular those individuals and Departments with specific responsibilities, as detailed in Section 3.
<b>(1.7) Provide details of how you involved stakeholders, views of colleagues, service users, staff side or other stakeholders when screening this policy/proposal.</b>	<p>This Policy was devised in collaboration with the Trust's Health and Safety Managers, Estates Services, Occupational Health Service, Engineering Workshops and Fracture Clinics</p> <p>Consultation with staff and their Trade Union Representatives during development and introduction of a policy is a legal requirement and it will also help to enhance employee relations, ref: Health &amp; Safety Consultation with Staff Regulations (NI) 1996 and the Safety Representatives and Safety Committee Regulations (NI) 1979.</p> <p>The Trust's Joint Health &amp; Safety Committee and Directorates representatives.</p> <p>A Trust wide consultation process will be undertaken which will involve Directors, Co-Directors, Senior Managers, Trust Joint Health and Safety Committee, Governance Leads and Health and Safety Managers.</p>
<b>(1.8) Other policies/strategies with a bearing on this policy/proposal</b> For example: internal or regional	<p>BHSCT General Health &amp; Safety Policy</p> <p>BRAAT Noise at Work Standard</p> <p>The Provision and Use of Work Equipment Regulations (NI) 1992</p>


policies	Workplace (Health, Safety and Welfare) Regulations (NI) 1993 Construction (Design and Management) Regulations (NI) 2016 The Personal Protective Equipment at Work Regulations (NI) 1993
<b>(1.9) Are there any factors that could contribute to/detract from the intended aim/outcome of the policy/proposal?</b> For example: Financial, legislative	Any staff unable to speak or read English competently or because of a learning disability or some other type of communication difficulty.

## 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**.

Screening Questions	Yes	No
(2.1) Is there an <b>impact</b> on <b>Equality of Opportunity</b> for those affected by this policy, for each of the S75* equality categories? I.e. is there a differential impact for one S75 group rather than the others?		<b>No</b>
(2.2) Are there better <b>opportunities</b> to promote equality of opportunity for people within the S75 categories?		<b>No</b>
(2.3) Does the policy <b>impact</b> upon <b>Good Relations</b> between people of a different religious belief, political opinion or racial group?		<b>No</b>

(2.4) Are there <b>opportunities</b> to better promote good relations between people of a different religious belief, political opinion or racial group?		<b>No</b>
(2.5) Are there <b>opportunities</b> to encourage <b>disabled people</b> to <b>participate</b> in public life and promote <b>positive attitudes</b> toward disabled people? (Disability Duties)		<b>No</b>
(2.6) Does the policy/proposal <b>impact</b> on <b>human rights</b> ?		<b>No</b>
*S75 equality categories include: Age, Dependent Status, Disability, Men and Women generally, Marital Status Ethnicity, Religion, Political Opinion and Sexual Orientation.		
<p><b>Screening Statement</b></p> <ul style="list-style-type: none"> <li>• If you have answered <b>Yes</b> to <b>any</b> of the above questions complete <b>Sections 3 - 9. <u>OR</u></b></li> <li>• If you have answered <b>No</b> to <b>all</b> of the above questions the policy may be <b>screened out</b> - go to <b>Screening Statement</b> at <b>2.7</b>.</li> </ul> <p><b>N.B: All Staff</b> must complete their <b>mandatory equality, good relations and human rights training</b> once every five years. This can be booked via HRPTS or completed online at <a href="http://www.hsclearning.com">www.hsclearning.com</a>. 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 <a href="mailto:Lesley.Jamieson@belfasttrust.hscni.net">Lesley.Jamieson@belfasttrust.hscni.net</a> for more information.</p>		
<p><b>(2.7) Screening Statement:</b></p> <p>This policy / proposal is '<b>screened out</b>' on the basis that: <span style="float: right;">(please tick)</span></p>		
It is a purely clinical or technical nature and has <b>no relevance</b> or <b>impact (actual / potential)</b> in terms of <b>equality of opportunity, disability duties, good relations and human rights.</b>	✓	

It aims to standardise practice and / or achieve best practice based on current evidence.		✓
<p><b>Reasonable adjustments</b> will be made for staff as required including any information e.g. leaflets/letters in accessible/alternative formats</p> <p>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, use the 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.</p>		✓
<p>Any other reasons: Please detail.</p> <p>This policy supersedes version 3, and although includes some updates does not significantly alter context, purpose or implementation</p>		
<p>Approved Lead Officer: Position: Date:</p>	<p>Anne Mageean / Jason Georgopoulos Health and Safety Manager 15<sup>th</sup> February 2023</p>	<p><i>Countersigned by*:</i> Equality Manager: Date:</p> <p> 16/08/23</p>
<p>Please sign / date and forward to the Equality and Planning Team for consideration</p> <p><b>*Equality screenings are completed with information provided by the policy / proposal author subject to advice and assistance provided by the Trust's Equality Managers.</b></p>		
<p><b>Section 3: Consideration of Equality and Good Relations Issues and Evidence Used</b></p> <p>This section records the quantitative and qualitative data you have used to consider equality and good relations issues including:</p> <ul style="list-style-type: none"> <li>The assessment of <u>impact</u> on staff and service users</li> </ul>		

- 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)
		Belfast / Castlereagh population	Service users affected %	
1. Age	0-15	22%		
	16-24	11%		
	25-34	12%		
	35-44	14%		
	45-54	14%		
	55-64	12%		
	65+	15%		

<b>2. Dependent Status</b>	Caring for a child dependant older person/ person with a disability	12% of usually resident population provide unpaid care - 36% of whom are male and 64% are female		
<b>3. Disability</b>	Yes No	21% 79%		
<b>4. Men and Women generally</b>	Female Male	49% 51%		
<b>5. Marital Status</b>	Married/Civil P'ship Single Other/Not known	34.21% 46.6% 19.19%		
<b>6. Race Ethnicity</b>	White Black/Minority Ethnic	98% 2%		
<b>7. Religion</b>	Roman Catholic	41%		

	Presbyterian Church of Ireland Methodist Other Christian	42%			
	Buddhist Hindu Jewish Muslim Sikh Other None	17%			
<b>8. Political Opinion</b> Based on total elected candidates in the local government elections, 2019		Belfast	Lisburn & Castlereagh		
	DUP	15	15		
	SF	18	2		
	SDLP	6	2		
	UUP	2	11		
	APNI	10	9		
	Green	4	1		
	PBP	3	0		
	IND	0	0		
	PUP	2	0		



<b>9. Sexual Orientation</b>	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  <i>Source: 2012 report by Disability Action &amp; Rainbow Project</i>		
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### (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	Groups	Quantitative Data	Qualitative Data
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Category		Belfast Trust workforce (@January 2022)	Staff affected by the Policy/Proposal %	
1. Age	16-24 25-34 35-44 45-54 55-64 65+	6% 23% 25% 23% 19% 3%		
2. Dependant Status	Dependants No Dependants Not known	18% 24% 58%		
3. Disability	Yes No Not known	2% 65% 33%		
4. Men and Women generally	Female Male	76% 24%		
5. Marital Status	Married/ Civil P'ship Single	45% 28%		

	Other/ Not known	27%		
<b>6. Race</b>				
a) Ethnicity	BME White Not Known	4% 68% 29%		
b) Nationality	GB Irish Northern Irish Other Not known	20% 15% 2% 1% 62%		
<b>7. Religion</b>				
a) Community Background	Protestant Roman Catholic Neither	35% 45% 20%		
b) Religious Belief	Christian Other No religious belief Not known	30% 1% 10% 59%		

<b>8. Political Opinion</b>  <i>* 2011 Assembly election</i>	Broadly Nationalist Broadly Unionist Other Do not wish to answer/ Unknown Not known	7% 6% 8% 78%		
<b>9. Sexual Orientation</b>	Opposite sex Same sex or both sexes Do not wish to answer	43% 1% 56%		

#### 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	Level of Impact			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)
<b>Age</b>				
<b>Dependant Status</b>				
<b>Disability</b>				
<b>Men and Women generally</b>				
<b>Marital Status</b>				
<b>Race (Ethnicity)</b>				
<b>Religion</b>				
<b>Political Opinion</b>				
<b>Sexual Orientation</b>				
<b>Multiple Identity e.g. disabled minority ethnic people or young Protestant men.</b>				

**(4.2) STAFF**

Equality Category	Level of Impact			Mitigation Measures and consideration of alternative policies or actions that might lessen the severity of the equality impact (where Major or Minor Impact identified)
	Major	Minor	None	

<b>Age</b>					
<b>Dependant Status</b>					
<b>Disability</b>					
<b>Men and Women generally</b>					
<b>Marital Status</b>					
<b>Race</b>	<b>Ethnicity</b>				
	<b>Nationality</b>				
<b>Religion</b>	<b>Community Background</b>				
	<b>Religious Belief</b>				
<b>Political Opinion</b>					
<b>Sexual Orientation</b>					
<b>Multiple Identity</b> e.g. female staff with caring responsibilities					

**Section 5: Good Relations**

Based on the **evidence** collected in Section 3 & 4:

- To what extent is the policy/proposal likely to **impact Good Relations** i.e. between people of different religious belief, political opinion or racial group?
- Are there any **additional measures** that could be suggested to ensure the policy or proposal **promotes Good Relations**?

Good Relations category	Level of impact			Mitigation Measures and Alternative Policies or Actions that might lessen the severity of the equality impact  (where Major or Minor Impact identified)
	Major	Minor	None	
Religious belief				
Political opinion				
Racial group				

### Section 6: Disability Duties

How does the policy / proposal:

<ul style="list-style-type: none"> <li>• <b>encourage disabled people to participate in public life</b> <i>and</i></li> <li>• <b>promote positive attitudes towards disabled people?</b></li> </ul> <p>Consider what <b>other measures</b> you could take to meet these <b>duties</b>.</p> <p><i>For example, have staff received disability equality training.</i></p>	
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**Section 7: Human Rights**

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

Does the policy/proposal **negatively impact** on any of the following human rights?  
 The rights particularly relevant in the delivery of health and social care are emboldened below. Examples for these rights and further information can be found in the [Equality Screening Toolkit](#).

Article	Yes	No
<b>A2: Right to life</b>		
<b>A3: Right to freedom from torture, inhuman or degrading treatment or punishment</b>		
A4: Right to freedom from slavery, servitude & forced or compulsory labour		
<b>A5: Right to liberty &amp; security of person</b>		
A6: Right to a fair & public trial within a reasonable time		



A7: Right to freedom from retrospective criminal law & no punishment without law		
<b>A8: Right to respect for private &amp; family life, home and correspondence.</b>		
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		
<b>A14: Prohibition of discrimination in the enjoyment of the convention rights</b>		
1st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property		
1st protocol Article 2 – Right of access to education		
<b>(7.1) 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:</b>		

<b>Section 8: Screening Decision</b>	<b>Major</b>	<b>Minor</b>	<b>None</b>
<b>(8.1) How would you categorise the impacts of this policy / proposal?</b> (Please underline one category)	(Screened In for an Equality Impact Assessment)	(Screened Out with mitigation)	(Screened Out)
<b>(8.2) If you have identified any impact, what mitigation have you considered to address this?</b>			
<b>(8.3) Do you think the policy/proposal should be subject to an Equality Impact Assessment (EQIA)?</b>	<b>Yes</b>	<b>No</b>	<b>Reasons</b>

<p>NB: A full Equality Impact Assessment (EQIA) is usually confined to those policies or proposals considered to have <u>major</u> implications for equality of opportunity/good relations/human rights.</p>			
<p><b>Section 9: Monitoring</b></p> <p><b>(9.1) Please detail how you will monitor the effect of the policy/proposal for impact in terms of equality of opportunity, good relations, disability duties and human rights?</b></p>			
<p>Please sign /date and forward to the Equality and Planning Team for consideration - <a href="mailto:Lesley.Jamieson@belfasttrust.hscni.net">Lesley.Jamieson@belfasttrust.hscni.net</a>.</p> <p><b>Equality screenings are completed with information provided by the policy / proposal author subject to advice and assistance from the Trust's Equality Managers.</b></p> <p><b>Please note that Completed and Signed Screening Templates are public documents and are posted on the Trust's website.</b></p>			
<p><b>Approved Lead Officer</b></p>	<p>Laota McQuitty</p>		<p><b>Countersigned by:</b></p>
<p><b>Position</b></p>	<p>Lead Health and Safety Manager</p>		<p><b>Equality Manager</b></p>
<p><b>Date</b></p>	<p>21 July 23</p>		<p><b>Employment Equality Manager</b></p>

