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

Group (Please specify) Care Services Women's Health Services Women's Health Services Primary Care	Section 1: Information about the Policy / Proposal										
(1.3) Department/Service Group: (please underline) Corporate Services Group (please underline) Corporate Services Group (please underline) Corporate Services Group (please specify) Care Care Corporate Services Group (please and Acute Services Group (please specify) Care Care Care Corporate Services Group (please specialist Hospitals & Community Social & Women's Health Care Care Care Corporate Services Group (please and Acute Services Health Care Care Care Care Corporate Services Group (please and Acute Services Health Community Social & Women's Health Care Care Care Care Care Care Care Care Corporate Services Group (please and Acute Services Hospitals & Community Social & Women's Health Care Care	(1.1)	Name of the policy/proposal	Parecoxib Inje	Parecoxib Injection for Acute Pain (Children 1-18 years)							
(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 be rolled out/put into practice e.g. will there be changes to how services will be Services Group (Please specify) User Experience Scheduled and Acute Care User Experience Scheduled and Acute Care Services Services Women's Health Services Women's Health Services Services Primary Care Social & Primary Care Background: Ensuring that children have access to the most effective analgesia to treat acute pain often necessitates a multi-modal approach in developing an individualised pain management plan for each patient. The choice of analgesic agents requires consideration of specific patient factors on a case-by-case assessment. Utilisation of the intravenous (IV) route for non-steroidal anti-inflammatory drug (NSAID) administration can be complicated by unsuitable medicine preparations and a lact of clinical guidance to promote safe and appropriate administration of IV NSAIDS. The purpose of this guidance document is to provide information for the safe and effective	(1.2)			New Existing Revised							
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 Background: Ensuring that children have access to the most effective analgesia to treat acute pain often necessitates a multi-modal approach in developing an individualised pain management plan for each patient. The choice of analgesic agents requires consideration of specific patient factors on a case-by-case assessment. Utilisation of the intravenous (IV) route for non-steroidal anti-inflammatory drug (NSAID) administration can be complicated by unsuitable medicine preparations and a lack of clinical guidance to promote safe and appropriate administration of IV NSAIDS. The purpose of this guidance document is to provide information for the safe and effective	(1.3)	•	Services User scheduled Specialist Hospitals & Community Social & Services (Please Care Services Health Care								
Scope: This policy applies to all patients aged 1-18 years in RBHSC that require the use of an	(1.4)	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	Background: Ensuring that children have access to the most effective analgesia to treat acute pain often necessitates a multi-modal approach in developing an individualised pain management plan for each patient. The choice of analgesic agents requires consideration of specific patient factors on a case-by-case assessment. Utilisation of the intravenous (IV) route for non-steroidal anti-inflammatory drug (NSAID) administration can be complicated by unsuitable medicine preparations and a lack of clinical guidance to promote safe and appropriate administration of IV NSAIDS. The purpose of this guidance document is to provide information for the safe and effective								

		injectable NSAID in the treatment of acute pain. The policy also applies to medical, nursing and pharmacy staff who manage these patients.
(1.5)	Who owns the policy/proposal? Where does it originate? For example: DoH / HSCB	Director, Child Health & NISTAR, Imaging, Medical Physics, Outpatients and Medical Illustration
(1.6)	Who are the main stakeholders affected (Internal and External)? For example: actual or potential service users, carers, staff, other public sector organisations, trade unions, professional bodies, independent, voluntary or community sector or others.	This policy applies to all patients aged 1-18 years in RBHSC that require the use of an injectable NSAID in the treatment of acute pain. The policy also applies to medical, nursing and pharmacy staff who manage these patients.
(1.7)	Provide details of how you involved stakeholders, views of colleagues, service users, staff side or other stakeholders when screening this policy/proposal.	 Paediatric Surgical, Medical & Anaesthetic Staff Paediatric Pharmacy Staff Paediatric Nursing Staff Advanced Paediatric Nurse Practitioner
(1.8)	Other policies/strategies with a bearing on this policy/proposal For example: internal or regional policies	None identified
(1.9)	Are there any factors that could contribute to/detract from the intended aim/outcome of the policy/proposal? For example: Financial, legislative	Belfast Trust is committed to the full implementation of this policy and through regular monitoring it is anticipated that the aims and objectives of the policy will be fully realised and any factors that could detract from those aims and objectives will be minimised/avoided.

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 impact on Equality of Opportunity 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?		No
(2.2) Are there better opportunities to promote equality of opportunity for people within the S75 categories?		No
(2.3) Does the policy impact upon Good Relations between people of a different religious belief, political opinion or racial group?		No
(2.4) Are there opportunities to better promote good relations between people of a different religious belief, political opinion or racial group?		No
(2.5) Are there opportunities to encourage disabled people to participate in public life and promote positive attitudes toward disabled people? (Disability Duties)		No
(2.6) Does the policy/proposal impact on human rights ?		No

^{*}S75 equality categories include: Age, Dependent Status, Disability, Men and Women generally, Marital Status Ethnicity, Religion, Political Opinion and Sexual Orientation.

Screening Statement

- 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.

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	X
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.	

Any other reasons: Please detail.

Approved Lead Officer:

Position: Paediatric Critical Care Pharmacist &

Lead Pharmacist Paediatric Surgery

Date: 6/9/23

John

Countersigned by*: Equality Manager: Date: Caroline McMenamin 03/10/2023

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

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

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	Service Users	Quantitative Data	Qualitative Data					

Category		(2011 Census Data u otherwise stated)		(Needs, Experiences, Priorities)
		Belfast / Castlereagh population	Service users affected %	
1. Age	0-15 16-24 25-34 35-44 45-54 55-64 65+	22% 11% 12% 14% 14% 12% 15%		
2. Dependent Status	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		
3. Disability	Yes No	21% 79%		
4. Men and Women generally	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 total elected candidates in the local government elections, 2019	DUP SF SDLP UUP APNI Green PBP IND PUP	15 18 6 2 10 4 3 0 2	Lisburn & Castlereagh 15 2 2 11 9 1 0 0					

9. Sexual	Opposite sex	Estimated 6-10% of	
Orientation	Same sex	persons identify as	
	Same and	lesbian, gay,	
	Opposite sex	bisexual	
	Do not wish to		
	answer /Not	Source: 2012 report	
	known	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	Groups	Quantita	ative Data	Qualitative Data
Category		Belfast Trust	Staff affected by	
		workforce	the	
		(@January	Policy/Proposal	

		2022)	%	
		===,		
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 Other/ Not known	45% 28% 27%		

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

8. Political Opinion * 2011 Assembly election	Broadly Nationalist Broadly Unionist Other Do not wish to answer/ Unknown Not known	7% 6% 8% 78%		
9. Sexual Orientation	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		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							

Men and Women generally			
Marital Status			
Race (Ethnicity)			
Religion			
Political Opinion			
Sexual Orientation			
Multiple Identity e.g. disabled minority ethnic people or young Protestant men.			

(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
	Major	Minor	None	(where Major or Minor Impact identified)
Age				
Dependant Status				
Disability				
Men and Women generally				

Marital St	tatus				
Race	Ethnicity				
	Nationality				
Religion	Community Background				
	Religious Belief				
Political (Opinion				
Sexual O	rientation				
Multiple lostaff with oresponsibility	dentity e.g. female caring ilities				

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			

Major	Minor	None	
			(where Major or Minor Impact identified)
	Major	Major Minor	Major Minor None

Section 6: Disability Duties	
How does the policy / proposal:	
encourage disabled people to participate in	
public life and	
 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 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 <u>Equality</u> Screening Toolkit.

Yes	No
	Yes

(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:

Section 8: Screening Decision			Major	Minor	None
(8.1) How would you categorise the impacts of this policy / pro (Please underline one category)	(Screened In for an Equality Impact Assessment)	(Screened Out with mitigation)	(Screened Out)		
(8.2) If you have identified any impact, what mitigation have you considered to address this?					
 (8.3) Do you think the policy/proposal should be subject to an Equality Impact Assessment (EQIA)? NB: A full Equality Impact Assessment (EQIA) is usually confined to those policies or proposals considered to have major implications for equality of opportunity/good relations/human rights. 	Reasons				
Section 9: Monitoring (9.1) Please detail how you will monitor the effect of the policy/pro for impact in terms of equality of opportunity, good relation disability duties and human rights?					

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

Equality screenings are completed with information provided by the policy / proposal author subject to advice and assistance from the

Trust's Ed	quality	Managers.
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Please note that Completed and Signed Screening Templates are public documents and are posted on the Trust's website.

Approved Lead Officer	John.	Countersigned by:
Position	Paediatric Critical Care Pharmacist & Lead Pharmacist Paediatric Surgery	Equality Manager
Date	6/9/23	Employment Equality Manager