

# Equality Action Plan 2024-2029



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**This document is available in alternative formats and language on request including:**

- Large font
- Braille
- Main minority ethnic languages
- DAISY
- Easy-read
- Electronic version.

Please see contact details of the relevant Equality Team in each Trust on Page 29.

## Welcome

Welcome to our new Equality Action Plan. This Plan sets out the actions the Health and Social Care Trusts will take forward collaboratively over the next five years.

There are six Health and Social Care (HSC) Trusts in Northern Ireland. Five of whom provide integrated health and social care services. These are as follows:

- **Belfast HSC Trust,**
- **Northern HSC Trust**
- **South Eastern HSC Trust**
- **Southern HSC Trust**
- **Western HSC Trust**



The sixth Trust is the Northern Ireland Ambulance Service, which is responsible for providing emergency, urgent and primary care services across all of Northern Ireland and safely transporting patients.

The six Trusts would like to take this opportunity to thank you for your contributions to our five year Equality Action Plan (2024-2029). This Equality Action Plan has been developed to tackle ongoing and emergent inequalities experienced by people protected by the nine Section 75 groups - that is people of different ages, religious beliefs, racial groups, political opinions, marital status, sexual orientations, men and women generally, people with and without disabilities, people with and without caring responsibilities.

## How we developed this Plan

Actions and priorities in this Plan have been informed by an audit of inequalities. The purpose of the audit was to identify key areas of potential inequality. To ensure consistency of approach and equity across the region, the six Trusts have worked collaboratively to gather emerging themes in relation to key inequalities experienced by the nine equality categories. We have collated available research and data to identify emerging themes, which we shared at regional listening events in June and July 2022 with a range of stakeholders including service users, carers, staff and trade unions representatives. We have developed our Equality Action Plan based on our consideration of the research and the feedback from the listening events. We also issued our draft Equality Action Plan for formal consultation for sixteen weeks between June and September 2023. Our intention is to have actions that will make a real and meaningful difference to the lives of people in Northern Ireland by addressing the inequalities they experience or to better promote equality of opportunity. The audit of inequalities will also be a valuable resource for future equality screening and equality impact assessments.

## Purpose of the Plan

We recognise that inequalities have regrettably worsened during the unprecedented global Covid-19 pandemic, the health and social care family, as a whole, is working continuously, and collectively to try to address the long waiting lists, waiting times and workforce challenges. Many health inequalities will be addressed through the day-to-day provision of health and social care services – for example, higher prevalence of mental ill health will be directly addressed regionally through the implementation of the Mental Health Strategy and delivery of mental health services across the Trusts.

From the outset, it is important to acknowledge this Plan will not be able to tackle all of these systemic inequalities but will focus on those inequalities in health and social care experienced by those protected in law by the equality and good relations duties of Section 75 of the Northern Ireland Act 1998. We also know that some of the inequalities identified in our previous audit of inequalities are persistent, having not yet been fully addressed and will remain as ongoing themes, on which we will continue to focus. This Action Plan goes beyond our compliance with our respective Equality Schemes but is complementary to the Schemes and seeks to address inequalities relative to our functions. We have deliberately focussed our actions to achieve better accessibility in service provision and to promote inclusion and diversity for those who work in health and social care.

This five-year Plan is designed to be flexible, adaptable and responsive to changing needs, emerging inequalities and circumstances. We will also review the Plan alongside our corporate plans and any legislative changes.

## Our achievements so far

The Trusts have worked collaboratively to address inequalities and to promote equality of opportunity and good relations. This collective approach has helped us achieve regional best practice and consistency and allowed us to combine our resources to maximise our efforts.

We provide updates in our annual progress reports to the Equality Commission and to our Executive Teams and Trust Boards to demonstrate the progress we have made (all of which are available on our respective websites).

For illustrative purposes, here are some details on just a few of our successful actions in our last Equality Action Plan.

## Regional Health and Social Care Good Relations statement

During 2020, we engaged with service users, staff, trade unions and representatives from the community and voluntary sector, the Equality Commission for Northern Ireland, the Northern Ireland Human Rights Commission, and the Community Relations Council to develop a regional HSC good relations statement.

We drafted a poster, highlighting the statement and have displayed this poster across Trust facilities in Northern Ireland, with an unequivocal and consistent message in terms of our commitment to good relations and the behaviours we expect from our staff, service users and those with whom we engage.



## Establishment of Ethnically Diverse Staff Networks

Staff networks have been established by and for staff of different ethnicities across Trusts to help promote equality, diversity and inclusion in all that we do and to focus on the needs of our ethnically diverse workforce to address and eradicate race discrimination and intolerance and to remove barriers our staff may experience.

## Joint Equality, Good Relations and Human Rights Forum

The Trusts have established a joint forum in partnership with colleagues in the Equality Commission, Human Rights Commission and Community Relations Council to help facilitate joint working and the sharing of information and expertise to help address inequalities and uphold human rights and promote equality and good relations in health and social care.



## Making Communication Accessible

The issue of communication has and continues to feature as a barrier – with a clear need for health and social care organisations to make improvements. The Trusts worked with disabled people and representative organisations to co-develop a [guide](#) for HSC staff on how to provide accessible communication for people with a disability.

It has been recognised as a useful and valuable resource in improving communication for people with a disability and their experience in health and social care.

## Guidance for our Trust Board and Executive Team

The Trusts also worked to develop a [guidance](#) for our Trust Board and Executive Team members as an aide memoire on the legislative requirements and matters to consider in their strategic decision-making.

## Making a Difference Regional HSC Online Training

Equality, Good Relations, Disability and Human Rights training is mandatory for all staff and all professions and a regional HSC online resource entitled “Making a Difference” has been developed to enable staff and managers to complete this via e-learning. To complement this, the Trusts have also developed a [guidance for staff](#) to help them refresh their knowledge or reference as needed.





## Supporting Carers

In recognition of the invaluable role that informal carers play, we held a workshop for health and social care staff who have caring responsibilities to identify how they can be supported to balance their caring responsibilities while continuing to work. The range of supports available to informal family carers includes a number of flexible working opportunities and a carer support programme.

## Disability Equality Training Resource



Working in partnership with disabled people, we have co-produced a [Disability Equality Training video](#). This video is delivered by people with a disability and is available for health and social care organisations and their partners to make sure disabled people are treated with respect and dignity.

## Disability Toolkit

The Disability Policy and Toolkit was co-developed by health and social care organisations and their respective trade union representatives and disability organisations. The one-stop Toolkit is available in easy-read format and a virtual, Page Tiger resource and provides a comprehensive overview of all issues related to disability for managers and staff.



## Gender Identity and Expression Employment Policy

We have developed a policy that supports people who identify as transgender or non-binary in the workplace. We worked with individuals and with voluntary sector groups who represent people who identify as transgender or non-binary to inform our policy.

### Value of co-design and collaborative working

None of this proactive work would have been possible without us engaging and working collectively with the people who face the inequality – those “experts by experience” ensure that these actions will make a real and meaningful difference. That is why we would encourage as many people as possible to take the time to review and influence the actions within our new Plan.

### What is in our Plan?

The following tables outline our actions for the next five years. The Plan includes actions aimed at:

- Improving the data we use to support decision making
- Addressing barriers to accessing health and social care
- Supporting our staff
- Supporting informal/family carers

The principles of *fairness, respect, dignity, equality and autonomy* will inform our work.

## How we will measure success of the actions in our Plan

This five year Plan is designed to be flexible and responsive to changing circumstances and needs and will evolve over its lifespan. The Plan illustrates how we will measure success through an outcomes-based approach. We will report annually on our progress against the Plan via our S75 Annual Progress Report to the Equality Commission for Northern Ireland (ECNI), which is submitted at the end of August each year and available on all of our websites or by contacting the Trusts' Equality Units.

[www.belfasttrust.hscni.net](http://www.belfasttrust.hscni.net)

[www.northerntrust.hscni.net](http://www.northerntrust.hscni.net)

[www.setrust.hscni.net](http://www.setrust.hscni.net)

[www.southerntrust.hscni.net](http://www.southerntrust.hscni.net)

[www.westerntrust.hscni.net](http://www.westerntrust.hscni.net)

[www.nias.hscni.net](http://www.nias.hscni.net)

## Section 1 – Improving the data we use to support decision-making

We know that high quality data plays a role in improving services and decision-making. When Trusts have good population data, they can identify areas that have worse health outcomes and target health and care resources to reduce health inequalities. Feedback from consultees has indicated that we need to improve the data we collect in relation to health and social care inequalities. The following actions are aimed at improving the data we collect to ensure the effective discharge of our S75 equality duties.

<b>The Trusts monitor staff across the 9 equality categories to ensure equality of opportunity. Staff input their own equality information on an online system but there are currently gaps in the data available.</b>		
<b>Actions</b>	<b>By when</b>	<b>How we measure success</b>
1. We will take active measures to encourage staff to update their equality monitoring information as part of corporate welcome/staff induction and by developing a regional and local campaign to encourage staff to update their equality profile information.	April 2024 and throughout the lifetime of the plan	<ul style="list-style-type: none"> <li>• Regular awareness raising campaigns to encourage staff to update their equality data.</li> <li>• Development of regional and local campaigns with timescales for staff to update their equality profile.</li> <li>• Increase in percentage of staff completing their equality monitoring data.<sup>1</sup></li> <li>• Promotional resources/Toolkits produced and disseminated to promote inclusion of all staff.</li> <li>• Input into the EQUIP project to ensure the next HR IT system is fully appropriate and fit for operational purpose. Regional subgroups to support its development and implementation.</li> <li>• Benchmark where appropriate with examples of good practice.</li> </ul>

<sup>1</sup> n.b. Provision of equality monitoring data on our Information System is voluntary for HSC staff but staff are encouraged to complete and update.

**ENCOMPASS is a new health and social care wide programme that will introduce a digital integrated care record to Northern Ireland.**

Actions	By when	How we measure success
2. We will work collaboratively to influence the ENCOMPASS programme to ensure that it monitors ethnicity, first language and communication support needs of patients and service users.	Throughout the lifetime of the plan	<ul style="list-style-type: none"> <li>• Ethnicity and communication support needs recorded on ENCOMPASS system.</li> <li>• Increased access to communication support in timely fashion.</li> <li>• Improved policy formulation, service delivery and population health data.</li> </ul>

**Under a new way of planning and commissioning services, the Integrated Care System (ICS) will bring together health and social care organisations, partners in voluntary and community sectors and local government, to develop population health plans to improve outcomes and wellbeing and reduce health inequalities.**

Actions	By when	How we measure success
3. We will work with partners to ensure the inclusion and analysis of Section 75 data in the development of population health plans.	April 2025 and throughout the lifetime of the plan	<ul style="list-style-type: none"> <li>• Robust population health plans including Section 75 data.</li> <li>• Identification of health inequalities.</li> <li>• Targeted services that address identified health inequalities and improve health outcomes.</li> </ul>

## Section 2 – Addressing barriers to accessing health and social care

While much work has been done to date to promote equality of opportunity, it remains the case that there are a number of equality groups, who continue to face particular and unique barriers. During the listening events and consultation period, we heard many suggestions on how to improve equality of access to health and social care services. The following actions have been developed in response to what we have heard, and are aimed at providing welcoming, person-centred and accessible services for everyone.

**Trusts have a duty to promote good relations between persons of different religious belief, political opinion or racial group. The regional Health and Social Care Good Relations Statement provides a consistent message in terms of our commitment to good relations. Belfast Health and Social Care Trust (BHSCT) has consulted on a co-produced Good Relations Strategy, which includes actions that will promote respect, equity and trust, and embrace diversity in all its forms.**

Actions	By when	How will we measure success
4. All Trusts will adopt the Good Relations Strategy and work collaboratively, with our partners, to take forward the actions and ensure consistency across Northern Ireland.	September 2026	<ul style="list-style-type: none"> <li>• Co-produced Good Relations Strategy.</li> <li>• Strategy adopted by all Trusts.</li> <li>• Regional approach to promotion of good relations in HSC Trusts where relevant.</li> </ul>

**We know that there is a lot of information available on improving health and wellbeing but we need to make sure that the content is understood and accessible.**

Actions	By when	How will we measure success
5. We will co-develop a series of health and social care seminars with representative organisations, communities and individuals to support health and wellbeing and address inequalities.	April 2025 and annually thereafter	<ul style="list-style-type: none"> <li>• Improved inclusive health and well-being information, targeted at the effected communities.</li> <li>• One regional seminar held each year.</li> <li>• Feedback and evaluation of seminars.</li> </ul>

**During Covid-19, the increased use of facemasks caused communication difficulties for Deaf and hard of hearing people and people who lip-read. The regional Health and Social Care Communication Support Service for People who are d/Deaf, d/Deafblind and Hard of Hearing was established in 2023 to provide consistent and improved access to communication support when accessing health and social care services.**

Actions	By when	How will we measure success
6. We will ensure staff are aware of the Health and Social Care Communication Support Service for People who are d/Deaf, d/Deafblind and Hard of Hearing and the facemasks approved by Infection Prevention Control, that are more accessible for people who have hearing loss, are Deaf/deaf and lip-read.	April 2025 and throughout the lifetime of the plan	<ul style="list-style-type: none"> <li>• Greater awareness of the regional HSC Communication Support Service for People who are d/Deaf, d/Deafblind and Hard of Hearing.</li> <li>• Greater awareness of the importance and availability of accessible facemasks.</li> <li>• Improved communication and patient experience.</li> <li>• Reduction in complaints.</li> <li>• Increase in compliments/positive feedback.</li> <li>• Proactive and targeted use of Care Opinion to promote better communication.</li> </ul>

**The Northern Ireland Health and Social Care Interpreting Service (NIHSCIS) provides professionally trained interpreters on a face-to-face basis. Trusts also have a regional contract for telephone interpreting for people, whose first language is not English, when accessing Health and Social Care services across Northern Ireland. Feedback indicated that access to interpreting support remains a barrier for some when accessing services.**

Actions	By when	How will we measure success
7. We will develop an interpreting card for patients and service users to present when they are in health and social care facilities. The card will indicate that the service user needs an interpreter and include contact details.	April 2025	<ul style="list-style-type: none"> <li>• Interpreting card for service users and patients to bring to their appointments to help support their communication needs.</li> <li>• Promotion of card in training sessions.</li> <li>• Increased staff awareness.</li> <li>• Reduction in complaints about lack of interpreting support.</li> </ul>



**Neurodiversity is a broad term, used to describe the many and varying ways in which human brains are wired. It encompasses the wide variety of ways humans think, learn, feel and process information. Neurodiversity can include Autism, ADHD, ADD, Dyslexia, Dyscalculia, Dyspraxia and Acquired Brain Injury. We acknowledge that staff, as well as patients and service users live with neurodiversity and there is a need to raise neurodiversity awareness in the workplace and in the provision of our services.**

Actions	By when	How will we measure success
8. We will draft and co-produce neurodiversity guidance and a podcast for our staff along with key stakeholders including experts by experience.	April 2026	<ul style="list-style-type: none"> <li>• Production of an online signposting resource/service directory on neurodiversity services.</li> <li>• Increased awareness and information provision for staff in terms of people who are neurodiverse.</li> <li>• Improved user experience.</li> <li>• Improved awareness of information and services for people who are neurodiverse.</li> <li>• Dissemination and launch of guidance.</li> </ul>

**We know that rurality has an impact on equality of access to services, especially for older people, due to lack of accessible transport, times of appointments and the availability of rural and/or community transport. Covid-19 has resulted in a widening of the digital divide affecting older people who may not be familiar with technology.**

<b>Actions</b>	<b>By when</b>	<b>How will we measure success</b>
<p>9. We will work with our partners to ensure that the needs of older and disabled people, who reside in rural communities, are considered in service developments or by promoting and monitoring the use of the Rural Needs Toolkit for Health and Social Care and completing Rural Needs Impact Assessments to identify mitigations put in place.</p>	<p>Throughout the lifetime of the plan</p>	<ul style="list-style-type: none"> <li>• Increased awareness of the needs of older people who live rurally.</li> <li>• Raised awareness of best practice in overcoming rural inequality and providing adequate and appropriate mitigations.</li> <li>• Increased number of rural needs impact assessments, where appropriate, which evidence consideration of rurality in service design and service change with reduction in any potential inequality for those living in rural areas.</li> </ul>

**We know that people may be reluctant to share their sexual orientation with health professionals and are unhappy having to disclose their sexual orientation repeatedly. We have also found that some people have had a negative experience when accessing health and social care services.**

Actions	By when	How will we measure success
<p>10. We will implement the Rainbow Badge initiative whereby staff will complete online training to gain a HSC Rainbow Badge. This is a voluntary initiative. The badge will be used to symbolise an open, non-judgemental and inclusive place for people that identify as LGBTQ+.</p>	<p>April 2025 and throughout the lifetime of the plan</p>	<ul style="list-style-type: none"> <li>• Adoption of Rainbow Badge initiative to ensure regional consistency.</li> <li>• Monitor the number of staff taking part in the initiative.</li> <li>• Gather feedback from staff and service users.</li> </ul>
<p>11. We will develop a resource for staff comprising professional body guidance on best practice for inclusion for people who are LGBTQ+.</p>	<p>April 2025</p>	<ul style="list-style-type: none"> <li>• Guidance available for health and social care professionals.</li> <li>• Increased staff understanding of improving access to services for LGBTQ+ service users.</li> <li>• Reduction in complaints and increase in compliments.</li> </ul>

## Section 3 – Supporting our staff

We know that our staff are our most valuable resource and the health and social care system in Northern Ireland is indebted to the work that they do every day and in particular, throughout the pandemic. We are committed to celebrating and embracing the diversity of our staff and to ensuring that they feel able to bring their authentic selves to work so that they feel valued and can continue to provide safe, effective and compassionate health and social care services.

<b>We have one of the most ethnically diverse workforces in the public sector and it is vital that we continue to promote the inclusion and visibility of staff who come from ethnically diverse backgrounds.</b>		
<b>Actions</b>	<b>By when</b>	<b>How will we measure success</b>
12. We will support the ongoing work of Trusts' ethnically diverse networks.	Throughout the lifetime of the plan	<ul style="list-style-type: none"> <li>• Action plans developed to oversee Trusts' strategies on EDI for staff.</li> <li>• Policies reviewed, developed and recommended relating to EDI.</li> <li>• Internal and external EDI groups and networks better engaged.</li> <li>• Stronger links across the region between our Ethnically Diverse Staff Networks.</li> </ul>
13. We will develop a Cultural Competency training and awareness programme for staff	March 2025	<ul style="list-style-type: none"> <li>• A co-produced package of e-learning is developed and made available for staff to access.</li> <li>• Staff access to supporting resources.</li> <li>• Deeper understanding of the key issues to help create a more inclusive environment for all.</li> </ul>

**We know that there are still incidents of homophobia in the workplace towards staff who are LGBTQ+ and we know that there is an under-declaration amongst staff who record their sexual orientation as LGBTQ+.**

Actions	By when	How will we measure success
<p>14. We will continue to work in partnership with LGBTQ+ representative organisations to ensure that training and awareness raising resources are consistent and up to date.</p>	<p>Throughout the lifetime of the plan</p>	<ul style="list-style-type: none"> <li>• Training developed to support staff to increase understanding of LGBTQ+ experiences.</li> <li>• Staff access to supporting resources.</li> <li>• Deeper understanding of the key issues LGBTQ+ people face to help create an inclusive environment for all.</li> <li>• Increased knowledge of appropriate language and policies that support inclusion.</li> </ul>
<p>15. We will promote the regional HSC LGBTQ+ network for staff across Trusts.</p>	<p>Throughout the lifetime of the plan</p>	<ul style="list-style-type: none"> <li>• Increased awareness and celebration of LGBTQ+ diversity.</li> <li>• Space provided for LGBTQ+ staff peer support.</li> <li>• Improve experience for LGBTQ+ staff by providing access to support.</li> <li>• Increased understanding of LGBTQ+ inclusion.</li> <li>• LGBTQ experiences more visible in the wider organisation.</li> </ul>

**Informal/family carers represent a significant proportion of the working population. A growing number of people working in health and social care are trying to balance their jobs and their caring responsibilities. The entitlement to carers' leave and flexible working arrangements are two of the main support measures that can help informal/family carers to keep a balance between their work lives and caring.**

<b>Actions</b>	<b>By when</b>	<b>How will we measure success</b>
16. We will improve awareness of options for flexible working, work-life balance, special leave policies to ensure they are accessible to all our staff.	April 2025 and throughout the lifetime of the plan	<ul style="list-style-type: none"> <li>• Establish baseline on uptake of flexible working and monitor year on year staff accessing these opportunities.</li> <li>• Increased awareness of flexible working, work-life balance and special leave policies.</li> <li>• Monitoring reports produced twice a year on flexible working.</li> </ul>

**It is important that staff who have or acquire a disability are supported in the workplace by overcoming any potential barriers to achieving their full potential. Trusts are committed to creating a safe and welcoming environment for all staff.**

<b>Actions</b>	<b>By when</b>	<b>How will we measure success</b>
17. We will scope development of Staff Disability Forums and Networks to support regional consistency.	March 2024	<ul style="list-style-type: none"> <li>• Effective implementation and widespread use of Disability Passport.</li> </ul>
<b>Actions</b>	<b>By when</b>	<b>How will we measure success</b>
18. We will develop an individual plan in partnership with disabled staff members to ensure they are supported through the provision of reasonable adjustments where appropriate.	Throughout the lifetime of the plan	<ul style="list-style-type: none"> <li>• Better support for disabled staff to return and remain in work.</li> <li>• Record available of what has been agreed previously to support disabled staff member if changing role.</li> <li>• Guidance available for managers on how to support disabled staff member.</li> </ul>

<b>Health and social care staff must have the foundation of effective policies and relevant training to support them to provide the most inclusive and compassionate health and social care services.</b>		
<b>Actions</b>	<b>By when</b>	<b>How will we measure success</b>
19. We will develop a regional policy framework to ensure Equality, Diversity and Inclusion (EDI) policies are reviewed in line with governance requirements.	Throughout the lifetime of the plan	<ul style="list-style-type: none"> <li>• Equality, Diversity and Inclusion (EDI) policies reviewed.</li> <li>• Policies reflective of up to date advice and best practice from the Equality Commission and other legislative developments.</li> <li>• Regional consistency in EDI policies and equity for all staff across the Trusts.</li> </ul>
20. We will update the regional HSC 'Making a Difference' e-learning programme further to review of best practice in E-learning and EDI training.	April 2028	<ul style="list-style-type: none"> <li>• Regional HSC Making a Difference e-learning programme updated.</li> <li>• Updated training incorporated best practice identified.</li> </ul>
21. We will work to improve uptake of equality training, which is mandatory in all Trusts.	Throughout the lifetime of the plan	<ul style="list-style-type: none"> <li>• Uptake of statutory mandatory equality training monitored.</li> <li>• Increased compliance levels with mandatory equality training.</li> <li>• Increased awareness of zero tolerance approach to racial harassment/ discrimination/ bullying and abuse at work.</li> </ul>
22. We will identify an EDI Champion at a senior level in each Trust.	April 2025	<ul style="list-style-type: none"> <li>• Identified lead on EDI at senior level.</li> <li>• EDI Champion at senior level identified in each Trust.</li> </ul>



Actions	By when	How will we measure success
23. We will work in partnership with trade unions to ensure that staff who experience domestic and sexual violence are supported in the workplace.	April 2026	<ul style="list-style-type: none"> <li>• Trust domestic and sexual violence workplace policy in place and support networks established.</li> <li>• Positive feedback from ongoing engagement from affected staff.</li> </ul>

<b>Personal stories can really resonate and be most impactful in terms of effectively communicating key messages. We recognise that collaborating with people with lived experience enhances the training we provide and gives staff a different perspective, improving the services we provide.</b>		
Actions	By when	How will we measure success
24. We will engage with external experts and representative organisations to provide specialist training for employees.	Throughout the lifetime of the plan	<ul style="list-style-type: none"> <li>• Training sessions developed delivered and evaluated.</li> <li>• Marketing and promotional strategy to increase uptake of training across all Trusts.</li> </ul>
25. We will develop a human rights based training programme and guidance for staff providing care for people living in residential settings. We will share and actively promote these resources with Independent Sector colleagues, who may also provide this care.	April 2025	<ul style="list-style-type: none"> <li>• Increased awareness and competence in providing person centred, person led care and what a human rights based approach.</li> <li>• Evaluation of training and associated resources.</li> </ul>

**We want to harness the talents of a diverse workforce and recognise that we need to take a proactive approach in improving access to health and social care employment for marginalised Section 75 groups.**

Actions	By when	How will we measure success
26. We will develop actions in line with legislative provision to improve access to those Section 75 groups, where there is a low representation in our workforce.	Throughout the lifetime of the plan	<ul style="list-style-type: none"> <li>• Improved access to employment for marginalised Section 75 groups.</li> <li>• Equality data indicating better representation.</li> </ul>
27. We will address specific health inequalities for staff, for example provide menopause information sessions and celebrate men's health week to promote inclusion and visibility of gender specific issues in the workforce.	Throughout the lifetime of the plan	<ul style="list-style-type: none"> <li>• Raised awareness of gender specific health inequalities for staff.</li> <li>• Increased inclusion and visibility of gender specific issues.</li> <li>• Better support for staff with gender specific issues.</li> </ul>
28. We will work collaboratively on the forthcoming gender pay gap legislation and determine appropriate methods of monitoring and reporting.	Dependant on enactment of legislation.	<ul style="list-style-type: none"> <li>• Pay structure established that ensures fairness and equity in pay and reward arrangements.</li> </ul>

## Section 4 – Supporting informal/family carers

We know that many of us are likely to become a carer at some point in life and informal/family carers cover a great part of care needs, often called the ‘invisible workforce’. Strengthening the voice and representation of informal carers is the first step to address the challenges facing informal carers. Informal care can be physically and mentally demanding, resulting in carers often feeling exhausted, lonely, and strained. Carer Co-ordinators in each Trust area work collaboratively with carers to develop an accessible carer support and short break programme. The Trusts also work with community and voluntary organisations to ensure carers can be signposted to support in their local area.

**Recognition of the key role a carer plays is essential and we must provide support when the caring role is having a negative impact on the health and well-being of the informal/family carer. It is also important to make useful information and training easily accessible and available to informal carers.**

Actions	By when	How will we measure success
29. We will work collectively to ensure that carers across the region are aware that they can have access to a conversation with their named worker in relation to their caring role and needs. The conversation is carer led and encourages both staff and carers to take time to discuss the caring role.	Throughout the lifetime of the plan	<ul style="list-style-type: none"> <li>• Increased uptake of carers’ assessments.</li> <li>• Improved carer experience of the carer assessment process.</li> <li>• Carers across Northern Ireland receive the same information and know where to get help and support.</li> <li>• Increase in people who identify as carers, which will enable them to link into supports available.</li> <li>• Quarterly DoH monitoring.</li> </ul>

Actions	By when	How will we measure success
30. We will hold an annual event on Carers Rights Day to highlight care and caring and help informal/family carers understand their rights and find out about support that may be available.	November 2024 and annually thereafter	<ul style="list-style-type: none"> <li>• Consistent, regional approach to Carers Rights Day.</li> </ul>

## Trust Equality Teams' contact details

### **Belfast HSC Trust**

Tel: 028 9504 6567

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### **Southern HSC Trust**

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