

Equality, Good Relations and Human Rights SCREENING TEMPLATE

- Note:
- 1) Proposals cannot be implemented until an Equality Screening or EQIA has been completed
 - 2) This template should be completed in conjunction with the accompanying Guidance Notes
 - 3) Completed Screening Templates are public documents and will be posted on the Trust's website

Section 1: INFORMATION ABOUT THE POLICY/PROPOSAL								
(1.1) Name of the policy/proposal	Non-Medical Prescribing Policy							
(1.2) Status of policy/proposal <i>(please underline)</i>	New		Existing			<u>Revised</u>		
(1.3) Department/Service Group: <i>(please underline)</i>	Corporate Services Group <i>(Please specify)</i>	Nursing and User Experience	Un-scheduled and Acute Care	<u>Surgery & Specialist Services</u>	Specialist Hospitals & Women's Health	Children's Community Services	Adult Social & Primary Care	
(1.4) Description of the policy including intended aims/outcomes	<p>This policy sets out a framework for the development and implementation of non-medical prescribing of medicines within Belfast Health and Social Care Trust (BHSC) and thus establishes a consistent approach for non-medical prescribing. This policy applies to all registered nurses, midwives, specialist community public health nurses, pharmacists and other allied health professionals registered with the Trust as non-medical prescribers of medicines in accordance with their job descriptions and KSF outlines.</p> <p>This policy was recently revised to reflect changes in legislation. All changes were technical in nature and have no impact on equality.</p>							
(1.5) How will the policy/proposal be implemented?	Policy will be implemented by individual professions							
(1.6) Who are the internal and external stakeholders (actual or potential) that the policy/proposal could impact	Service Users Staff							

upon? (E.g. service users/staff/ other public sector organisations/trade unions/ professional bodies/independent, voluntary or community sector)

Professional Bodies

Section 2: CLASSIFICATION OF POLICY

The purpose of this Section is to identify those policies/proposals which have **no impact on equality** e.g. policies of a purely clinical or technical nature.

It should be noted however that the majority of policies /proposals will have some equality impact on staff and/or service users and will require the completion of the entire template.

PART A:

- (2A.1) Is there an impact on equality of opportunity for those affected by this policy, for each of the S75* equality categories?
- (2A.2) Are there better opportunities to promote equality of opportunity for people within the S75 categories?
- (2A.3) Does the policy impact upon good relations between people of a different religious belief, political opinion or racial group?
- (2A.4) Are there opportunities to better promote good relations between people of a different religious belief, political opinion or racial group?
- (2A.5) Are there opportunities to encourage disabled people to participate in public life and promote positive attitudes toward disabled people?
- (2A.6) Does the policy/proposal impact on Human Rights?

Yes

No

✓

✓

✓

✓

✓

✓

(2A.7) If you have answered Yes to **any** of the above questions proceed to Section 2B overleaf.

If you have answered No to **all** of the above questions the policy **may** be screened out at this stage. Please give reasons supporting this decision below then sign and date below then forward to the Health & Social Inequalities Team for consideration

Lesley.Jamieson@belfasttrust.hscni.net

This policy is clinical in nature and aims to standardise practice and / or achieve best practice.

The policy contains the current evidenced based thinking on the topic, however data and statistics are routinely collected and correlated and

should the need arise the guideline will be updated. Compliance with this guideline will be subject to regular audit and dissemination of findings.

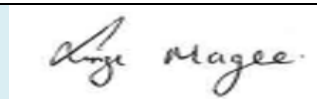
There is no adverse impact on equality or human rights for staff or service users and so the screening outcome is 'screened out'. This outcome is subject to review; if there are substantive changes in the guideline or additional evidence is provided.

Inherent to this screening determination is the assumption, based on person centred care, that reasonable adjustments will be provided and that any information provided to patients will be provided in accessible/alternative formats as required. Accessible formats can include, for example, information in easy to read formats or audio formats when the patient has a learning disability or is visually impaired. If a patient does not speak English as a first language the information will be translated or an interpreter / sign language interpreter provided as appropriate. To that end, the policy has been amended slightly, in agreement with the policy author, to include the following line at section 6.2:

'Information will be communicated to the patient/service user in a way that is easily understood. This may include the need to use a professional interpreter or the provision of information in alternative formats for people with a disability.'

In addition, it is recommended that staff comply with the requirement that all Belfast Trust staff complete mandatory equality, good relations and human rights training once every five years. Belfast Trust Staff can also access a suite of equality and diversity training including: disability awareness, human rights and embracing diversity in HSC training – please contact the Health and Social Inequalities team for more information.

Approved Lead Officer:
Position: Medication Safety
Pharmacist



Countersigned by:
Health Inequalities Manager:
Employment Equality Manager:

Louise Neeson
23/03/2021

Date:

23/03/2021

PART B

(2B.1)

Are there any factors that could contribute to/detract from the intended aim/outcome of the policy/ proposal? *Financial, legislative or other constraints?*

*ability * Gender * Marital - Civil Partnership Status * Political Opinion * Race * Religion * Sexual Orientation*

<p>(2B.2) Other policies/strategies/information with a bearing on this policy/proposal (<i>for example internal or regional policies</i>) - What are they and who owns them?</p>	
<p>(2B.3) Provide details of how you have or how you intend to involve stakeholders (refer 1.6 above) when screening this policy/proposal</p>	
Section 3: AVAILABLE EVIDENCE , CONSIDERATION OF IMPACTS AND MITIGATION	

You will need to collect quantitative and qualitative equality data for those service users and staff affected using the templates provided in Tables 1 & 2 at the end of this document.

Taking into account this data and the information gathered in Sections 1&2 you should now identify, for each of the nine Section 75 categories, the level of impact, mitigation measures and opportunities to better promote equality of opportunity.

NB: Where both staff and service users are impacted, a separate table for each is required.

3A) SERVICE USERS

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	
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.				

3B) 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	
Age					
Dependant Status					
Disability					
Gender					
Marital Status					
Race	Ethnicity				
	Nationality				
Religion	Community Background				
	Religious Belief				
Political Opinion					
Sexual Orientation					
Multiple Identity e.g. female staff with caring responsibilities					

Section 4: GOOD RELATIONS

To what extent is the policy/proposal likely to impact on good relations between people of different religious belief, political opinion or racial group?

Good relations 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	
Religious belief				
Political opinion				
Racial group				

Section 5: DISABILITY DUTIES

<p>How does the policy/proposal or decision currently encourage disabled people to participate in public life and promote positive attitudes towards disabled people? Consider what other measures you could take.</p> <p><i>For example, have staff received disability equality training or training on the Trust's Patient and Client Experience Standards?</i></p>	
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Section 6: HUMAN RIGHTS

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

NB: If you identify potential negative impact in relation to any of the Articles seek advice from your line manager and/or a representative from the Equality Team. It may also be necessary to seek legal advice.

Article	Positive impact	Negative impact *	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 compulsory labour			
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 punishment without law			
A8: Right to respect for private & family life, home and correspondence.			
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			
A14: Prohibition of discrimination in the enjoyment of the convention rights			
1st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			
1st protocol Article 2 – Right of access to education			

<p>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.</p>	
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** A negative impact is where human rights have been interfered with or restricted*

Section 7: SCREENING DECISION	Major	Minor	None
(7.1) How would you categorise the impacts of this policy/proposal?			

(7.2) If you have identified any impact, what mitigation have you considered to address this?			
(7.3) Do you consider the policy/proposal needs to be subjected to on-going screening?	Yes	No	Reasons
(7.4) Do you think the policy/proposal should be subject to an Equality Impact Assessment (EQIA)? <i>NB: A full Equality Impact Assessment (EQIA) is usually confined to those policies or proposals considered to have major implications for equality of opportunity.</i>	Yes	No	Reasons
(7.5) Monitoring- Please detail how you will monitor the effect of the policy/proposal for equality of opportunity and good relations, disability duties and human rights?			
Please sign and date below and forward to the Health & Social Inequalities Team Lesley.Jamieson@belfasttrust.hscni.net			
Approved Lead Officer	Countersigned by:		
Position	Health Inequalities Manager		
Date	Employment Equality Manager		

Tables 1 and 2: **Qualitative and Quantitative Data required to assess level of impact, mitigation and opportunities to better promote equality of opportunity (As referred to in Section 3)**

Table 1: SERVICE USERS *2011 Census Data unless otherwise stated

Equality Category	Service users	Quantitative Data*		Qualitative Data (Needs, Experiences, Priorities)
		Belfast / Castlereagh population	Service users affected	
1. Age	0-16 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 None Not known	12% of usually resident population provide unpaid care		
3. Disability	Yes No Not known	21% 69% n/a		

4. Gender	Female Male	51% 49%		
5. Marital Status	Married/Civil P'ship Single Other/Not known	47% 36% 17%		
6. Race Ethnicity	White Black/Minority Ethnic Not known	98% 2% n/a		
7. Religion	Roman Catholic Presbyterian Church of Ireland Methodist Other Christian	41% 42%		

	Buddhist Hindu Jewish Muslim Sikh Other None	17%		
8. Political Opinion <i>*2011 Assembly election</i>	Broadly Nationalist Broadly Unionist Other Do not wish to answer/ Unknown	45% 48% 2% 5%		
9. Sexual Orientation <i>*2012 report by Disability Action & Rainbow Project</i>	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		

Due to small numbers of staff within certain equality categories a detailed breakdown of equality data will not be provided.

Table 2: STAFF *@January 2017				
Equality Category	Groups	Quantitative Data		Qualitative Data
		Trust workforce*	Staff affected	

1.				
Age	<25 25-34 35-44 45-54 55-64 65+	4% 24% 26% 28% 16% 2%		
2.				
Dependant Status	Dependants No Dependants Not known	23% 19% 58%		
3.				
Disability	Yes No Not known	2% 67% 31%		
4.				
Gender	Female Male	78% 22%		
5.				
Marital Status	Married/ Civil P'ship Single Other/Not known	56% 34% 10%		
6. Race				
a) Ethnicity	BME White Not Known	4% 76% 20%		

b) Nationality	GB Irish Northern Irish Other Not known	18% 10% 2% 1% 69%		
7. Religion a) Community Background	Protestant Roman Catholic Neither	42% 50% 8%		
b) Religious Belief	Christian Other No religious belief Not known	28% 1% 8% 63%		
8. Political Opinion *2011 Assembly election	Broadly Nationalist Broadly Unionist Other Do not wish to answer/ Unknown	6% 7% 8% 79%		

9. Sexual Orientation	Opposite sex Same sex or both sexes Do not wish to answer /Not known	41% 1% 58%		
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