

Five Year Review of Equality Scheme

Report

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Executive Summary

a) To what extent has your public authority's approved scheme provided a workable basis for mainstreaming the need to promote equality of opportunity and good relations into policy-making over the past five years?

The scheme has proved a reasonably workable basis for mainstreaming equality and good relations in decision-making from the point of view that it covers essential elements of mainstreaming.

The mainstreaming of screening has been progressing across the organisation with, for the most part, service and policy outcomes benefiting from the process. However at times, for example with technical policies, minor policies, or regional policies that have no scope for change, the screening process can seem overly procedural and not contribute to better outcomes, impacting on staff buying into the process and its ability to advance equality of opportunity generally, as a result.

Successful elements include, for example, the training commitments. They underline the importance of carrying out sessions to develop specialist knowledge and skills of staff in actively promoting equality in particular. In practice, the refinement of skills in undertaking equality screenings and equality impact assessments largely takes place on the job.

The rationale for inclusion of certain elements of the scheme is not entirely clear. Thus, for instance, the reason for placing particular emphasis on ensuring and assessing access to services (Section 8 of the scheme), as opposed to all aspects of service provision (that is the quality, experience and outcome of services alongside access), is unclear. At times, this has tended to lead staff to exclusively focus on access issues in screenings.

Likewise, the rationale for placing the requirement on public authorities to develop a programme of awareness raising on the Section 75 statutory duties (Section 3 of the scheme) remains unclear.

It seems reasonable to conclude that the good relations part of Section 75 has played a less prominent role than the promotion of equality of opportunity. The BSO would argue that progress in this respect has been contingent less so on the equality scheme itself than on a fundamental caution to move away from the concept of a neutral work environment, given conflicting statutory requirements and the resulting risk of being in breach of these. The organisation would welcome clearer guidance as to the implications for organisations which actively promote the discussion of religious and political identities in light of statutory requirements under fair employment legislation.

Ultimately, the question arises whether the scheme itself adds value to the aim of mainstreaming, given that schemes across many public authorities are largely uniform, driven by the existence of the Commission's model scheme.

In other words, it may be argued that if the legislation itself was to bind public authorities directly into the key elements of mainstreaming, rather than requiring them to develop a scheme that does so, further resources could be freed up to focus on implementation. From a corporate point of view, a diversity strategy and action plan could become a more meaningful manifestation and driver for implementation, specific to the functions of the organisation. It could also serve to bring together the range of equality related action plans currently in existence (including under Section 75, the Disability Discrimination Order, The Fair Employment and Treatment Order and others). Experience has shown that the existence of separate plans cause confusion to staff and external stakeholders alike.

b) What key lessons have been learnt over the past five years in terms of effectively implementing the approved equality scheme?

The BSO's experience has shown that a partnership approach together with other HSC organisations supported by a specialist unit allows the pooling of resources, creates economies of scale, enables the delivery of a rolling programme of training and the development of relationships with voluntary sector organisations. Most importantly, it facilitates shared learning and consistency where possible.

This partnership approach has also been beneficial to our organisation through easier and more efficient facilitation of regional work across HSC in Northern Ireland, including the 11 partnership organisations and the 6 Health and Social Care Trusts. For example areas of work that have been progressed across HSC NI include, a Trans Employment Policy, an Accessible Formats Policy and the development of a suite of eLearning modules for staff on Diversity, Disability and Cultural Awareness.

The partnership has also facilitated engagement with targeted Section 75 groups as and when required. This approach not only maximises our own internal resources, but has proven beneficial to community and voluntary groups, who have limited resources, which has therefore enhanced their capacity and willingness to participate.

With regards to training, it transpires that those types of training are most effective which have a practical focus. Sessions should be supported by written information materials (practical, jargon-free guidance) to provide a resource that staff can draw on for their reference.

c) What more needs to be done to achieve outcomes for individuals from the nine equality categories?

With regards to individual groups, a particular focus on the following could achieve further important outcomes:

- Sexual Orientation
- Dependants
- Religion.

The more equality becomes mainstreamed in the work the more difficult it becomes to ascertain what achievements are down to work under Section 75. Equality needs further promotion and awareness raising. There is a need to consider the wider societal context – as a society “we are not there yet”. It should be continually reinforced that equality is about attitudes and behaviour, as much as process.

With regards to particular areas of equality scheme implementation, the review has shown that it may be most effective for the organisation to concentrate further efforts on:

(1) screening and Equality Impact Assessments

(2) monitoring

(3) training

(4) engagement – using existing structures and processes to engage on equality issues rather than creating additional processes.

1. A general introductory statement specifying the purpose of the scheme and the public authority's commitment to the statutory duties.

1a) To what extent were senior management involved in ensuring scheme compliance over the 5 year period and what further steps could be undertaken to ensure effective internal arrangements?

Prompts – Identify any changes to arrangements for managing scheme implementation, and what were the lessons learnt in terms of enablers and impediments to monitoring scheme implementation?

The Business Services Organisation's Equality Unit convenes the equality forum with representation from the BSO and client organisations. Throughout the five-year period the group met formally on a quarterly basis to share good practice in the implementation of Section 75 and to plan joint work. At a strategic level, the Equality Unit has represented the organisation on regional groups, such as the Equality and Human Rights Steering Group convened by the Department of Health, Social Services and Public Safety (DHSSPS).

Members of the Senior Management Team were involved in a number of ways:

- Annual progress reporting: scrutiny of progress and direction setting for the coming year.
- Considering and taking action on Equality Scheme issues brought to the team by the Equality Unit;
- Director level engagement with the Equality Commission at key points.

Senior managers played an important role by

- Contributing to annual progress reporting by identifying relevant initiatives in their area of responsibility;
- Undertaking quality assurance of quarterly equality screening reports

Over time, arrangements were changed in that a process was established to ensure regular review of equality screenings by each division

- Ensuring training attendance of relevant staff
- scrutiny of equality screenings
- participation in internal forum or working groups.

Looking ahead

The organisation will undertake the following steps to further ensure effective internal arrangements:

- Update and refresh training to senior managers and teams to further mainstream equality
- Review equality forum membership to ensure all service areas are represented and attend.
- Establish links with disability staff forum and other relevant staff fora.

1b) Outline annual **direct** expenditure of resources to ensure that the statutory duties were complied with, in terms of staff and money over the past 5 years, and comment on the extent that all necessary resources were allocated.

Prompts – Identify costs related to equality unit staff, use of consultants, allocation of budgets to training/publications/research, extent of in-year bids and/or reallocation of resources. What were the lessons learnt in terms of enablers and impediments to monitoring resourcing? What could the public authority do in future to ensure effective allocation and monitoring of necessary resources?

The Business Services Organisation Equality Unit employs four members of staff, three at senior level and one administrator. The Unit provides support services to 11 HSC organisations in total. The following table specifies the amount the BSO contributed to the cost of the Unit over the past five years:

Table 1: Expenditure on Equality Services 2011/12 - 2015/16

Year	Expenditure
2011/12	33,701
2012/13	48,079
2013/14	47,982

2014/15	33,311
2015/16	38,371
total	£201,444

In addition, some expenditure on alternative formats and staff time of the organisation's nominated equality lead applies.

Overall, the partnership arrangements between the regional HSC organisations have produced significant economies of scale. Examples include the design and delivery of training and good practice initiatives, jointly for the organisations or holding two equality best practice conferences during the five year period.

Monitoring the allocation of resources on equality scheme implementation becomes more difficult the more successful mainstreaming is. This applies in particular to the monitoring of staff time, for instance the time spent on equality proofing policies as this becomes an integral part of the policy development process.

2. An outline of how the public authority intends to assess its compliance with the Section 75 duties and for consulting on matters to which a duty under that section is likely to be relevant.

2a) Outline impacts and outcomes (for the public authority and/or individuals from the nine equality categories) over the past five years and what further steps could be undertaken to build on these or address underreporting?

Prompt – Were outcomes delivered for all of the nine equality categories? Were annual progress reports critically reviewed before or after submission to the Commission? What examples of good practice from other public authorities could be adopted?

Outcomes for individuals from the nine equality categories

The following table provides an overview of key impacts and outcomes:

Table 2: Key Activities 2011/12 – 2015/16

Business Year	Activity
2011 – 12	<p>Within Family Practitioner Services work progressed to improve accessibility to the FPS Call Recall Service for Bowel Cancer Screening. Particular emphasis was placed on sensory impairment needs of service users. In addition protocols have been developed for staff making appointments and information has been shared with staff on the contribution of The Big Word Telephone Interpreting Service.</p> <p>Age/Disability</p> <p>Within Family Practitioner Services, Cancer Screening Services, steps have been taken to ensure communication and mobility access needs are identified and recorded. This is to ensure that Specialist Screening Services Providers can make appropriate arrangement when making appointments.</p> <p>Age/Disability</p> <p>As part of Service Level Agreements with partner organisations Customer Care and Service Improvement has put in place a commitment by all BSO service providers to ensuring equality duties are fulfilled. This applies to those partner organisations that receive services from the Equality Unit.</p> <p>All Categories</p> <p>The BSO Equality Unit has led, on behalf of our partner organisations, work in relation the development of a draft accessible information policy. This has been developed in partnership with a range of individuals and groups and is based on good practice advice and guidance from elsewhere.</p>

Age/Disability/Ethnicity

The BSO Equality Unit, as part of its support to the BSO and other partner organisations has ensured that the Equality and Human Rights Information Bank on the BSO website is regularly updated.

All Categories

Internal Audit has progressed the mainstreaming of the equality duties through the inclusion of an equality screening element within all relevant audit plans.

All Categories

In December 2011 Senior Management Team approved the use of a revised screening template and associated guidance.

All Categories

In March 2012 SMT approved the proposal to introduce screening training as a mandatory requirement for Directors and Assistant Directors in the first instance.

All Categories

BSO participated in the roll-out of Bowel Cancer Screening to all five Trust areas, which was completed in January 2012, and assisted in the planning of the extension of this service to include people aged 71years from April 2012.

Age/Disability

Within Pensions Branch Implementation of SMS facility has resulted in approximately 300 pensioners now registered with the scheme.

Age/Disability

Recruitment materials, advertisement and application pack for Public Appointments for the new Research Ethics Committees have been

	<p>developed in accordance with equality duties.</p> <p>All Categories</p> <p>The Training Administration System (TAS) was introduced in 2011-2012. This will help to improve the information available on the uptake of training by staff across the organisation including Section 75 equality training.</p> <p>All Categories</p> <p>The Translink Travel Card scheme was introduced in the BSO. Whilst targeted at all staff those with disabilities who have no access to other forms of transport are intended beneficiaries.</p> <p>Age/Disability</p> <p>The BSO developed a Health and Wellbeing Policy which is designed to improve all aspects of staff health and wellbeing.</p> <p>Disability</p> <p>The BSO has also participated in a HSC – wide initiative led by the Public Health Agency to improve the health and wellbeing of lesbian, gay, bisexual and transgender people in the workplace through the establishment of a dedicated HSC staff forum.</p> <p>Sexual Orientation/Gender</p> <p>Staff from the BSO Equality Unit were involved in the development of a new eLearning resource on creating more inclusive workplaces for lesbian, gay, bisexual and transgender people.</p> <p>Sexual Orientation/Gender</p>
2012 – 13	<p>The Assistant Chief Legal Adviser has provided 10 social care procurement training sessions over 2012/13. The issues covered include Section 75, equality duties and relevance to procurement of services. This training was</p>

	<p>delivered to approximately 200 managers within HSC in NI.</p> <p>All Categories</p> <p>Directorate of Legal Services has provided significant training to relevant staff in the HSC bodies in respect of the law relating to service users, in particular children and vulnerable adults, in the medical setting, social care and mental health services. Such training focused on relevant areas of law, such as Capacity and Consent, Human Rights Act 1998, The Children (NI) Order 1995 and The Mental Health (NI) Order 1986.</p> <p>Age/Disability</p> <p>HSC Pensions, the update of website allowed improvement of accessibility by including translate options and accessibility buttons.</p> <p>Disability/Ethnicity</p> <p>Finance Directorate, through the implementation of the HRPTS system on-line payslips have been made available to all staff members from 7th January 2013.</p> <p>Disability/Age</p> <p>BSO collect information from staff on communication needs (in particular about visual impairment) and have resulted in magnification of payslip which is available to all staff members with on-line payslip facility.</p> <p>Disability</p>
2013 – 14	<p>With regards to the provision of information, we have made important progress with the development of a new Accessible Formats Policy. Equality Unit has developed key support products for our staff.</p> <p>Age/Disability/Ethnicity</p>

After much of our efforts were focused on the development of our Disability Action Plan in the previous year, this year we were able to turn to delivering on it.

Disability

As the first in a series of awareness days, we decided to focus on the issues faced by people with epilepsy. We did so by promoting Purple Day, the International Epilepsy Awareness Day, in the workplace. It took place on 26th March.

Disability

We also worked with the Health and Social Care Board and other regional partners to explore creating meaningful work placement opportunities for people with disabilities. We intend to offer six-months placements in our organisation from 2014-15 onwards.

Disability

We have also nominated a disability champion at senior level.

Disability

Building on the learning from recent local seminars on the needs and experiences of transgender people in the workplace, the Equality Unit commenced work with Human Resources colleagues to explore the scope for the development of a policy on transgender. In a first step, this has involved reviewing good practice materials and recommendations published on the internet.

Gender

During the year, the Equality Unit designed and delivered a dedicated workshop for senior staff. Its aim was to develop a refined understanding of the EQIA process and its key challenges compared with an in-depth screening.

All Categories

The Directorate of Legal Services has provided training across the HSC Sector advising on many different areas of law. Sessions during 2013/14 included guidance on Section 75, and training on Equality in Social Care Procurement.

All Categories

In addition, the Directorate has provided significant training to relevant staff in the HSC bodies in respect of the law relating to service users, in particular children and vulnerable adults, in the medical setting, social care and mental health services.

Age/Disability

All HSC Trusts now have access to Pensions database via Employer Services. This service allows the employer to view employee details and carryout estimate calculations of benefits.

Age

The new Human Resources, Payroll and Travel System (HRPTS), implemented in the BSO in 2013, has improved reporting functionality which enables better analyses of equality information based on the Section 75 categories. The new system has the facility for employees to maintain and update their personal information.

All Categories

The Leadership Centre and the Clinical Education Centre have highlighted their continued practice of

- engaging with our customers, service users and commissioners on an ongoing basis to ensure that our products and interventions comply with their needs and are fully compliant with our equality and

	<p>human rights obligations</p> <ul style="list-style-type: none"> • asking our participants on training courses to fill in an evaluation form which we then analyse and respond as appropriate, • providing information in alternative/other accessible formats upon request, • striving to improve our performance within the context of a learner/commissioner centred approach and also in a way that meets all our equality and human rights duties. <p>All categories</p> <p>The provision of teleconference facilities reduces travel for people that may have difficulty in accessing transport.</p> <p>Disability</p> <p>Teleconference meetings have been replaced by email meetings for a research ethics committee member with hearing impairment.</p> <p>Disability</p>
2014 – 15	<p>Pensions</p> <ul style="list-style-type: none"> • Engagement with University of Third Age to gain an insight to the challenges faced by people of the retired community particularly how these customers feel about the increased use of technology in our communications. <p>Age</p> <ul style="list-style-type: none"> • training for staff on how to identify, discuss and begin to develop skills and techniques for managing those under stress and also how to identify how to spot stress in others and how to support them. <p>Disability</p> <ul style="list-style-type: none"> • We have authorised alternative work patterns to staff so that they can achieve a better work

life balance. Staff now more satisfied in work and report a positive change to their work life balance.

Disability/Dependants/Gender

Human Resources

- Physical activity support (corporate gym membership, cycle to work, health fairs) – while all age groups will benefit as such, older people may experience positive impacts in particular as to the opportunity to retain their health and wellbeing

Disability

- Mental Health First Aid, Personal Resilience and Mindful Manager courses for all staff – particular benefits for staff who may experience stress as a result of life events such as bereavement, separation, or divorce

Disability/Marital Status

- Physical activity support, Mental Health First Aid, Personal Resilience and Mindful Manager courses for all staff – particular benefits for staff who experience some forms of mental ill health.

Disability

- Mental Health First Aid, Personal Resilience and Mindful Manager courses for all staff – particular benefits for staff who may experience stress as a result of caring responsibilities for young and old dependants.

Disability/Dependants

Information Technology Services

The eNISAT system continues to be rolled out. Whilst screening for older people, it also helps

	<p>identify service users with disabilities.</p> <p>Age/Disability</p> <ul style="list-style-type: none"> • In order to enable Mental Health information to be brought into the Electronic Care Record several meetings were held with a number of the key stakeholders – Bamford Monitoring Group, Patient and Client Council & PAC. As part of the Patient and Client Council engagement, service users were involved and were given details of the proposal and provided comments. <p>Disability</p> <p>Clinical Education Centre</p> <ul style="list-style-type: none"> • A wheelchair was purchased to provide access to classrooms for service users / clients / participants with mobility issues <p>Disability</p>
<p>2015 – 16</p>	<p>The BSO participated in the HSC Disability Placement Scheme offering 11 placements across the BSO.</p> <p>Disability</p> <p>We continue to promote positive attitudes towards disabled people through the facilitation and promotion of disability awareness days. Two days were organised in 2015-16, the first on deafness and hearing loss and the second on learning disability. Community and voluntary sector colleagues participated in both days and staff were encouraged to attend.</p> <p>Disability</p> <p>The BSO Equality Unit, in partnership with HSCB colleagues led the development and establishment of the HSC Disability Staff Forum</p>

	<p>which supports and enables staff across HSC.</p> <p>Disability</p> <p>We adopted a Good Relations Statement in partnership with 10 HSC regional agencies. We will consider how this statement informs our work.</p> <p>Religion/Political Opinion/Ethnicity</p> <p>We undertook an equal pay audit.</p> <p>Gender</p>
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Based on the analysis of the information in the table, the organisation recognises that fewer outcomes have been achieved for the following groups:

- Sexual Orientation
- Dependants
- Religion.

Thus, the organisation will endeavour to explore further the particular needs of these groups in relation to both employment and services and what additional action could be taken to address these.

- Sexual Orientation
 - Participating in the Diversity Champion programme on LGB & Trans equality.
- Religion
 - We will explore how the Good Relations Statement will inform our business planning and corporate communications.
- Gender
 - Promote and advance gender equality, including on career progression and the provision of breastfeeding facilities in the BSO.
 - Participating in the Diversity Champion programme on LGB & Trans equality.

Outcomes for the Public Authority

The Business Services Organisation's activities to deliver on the Section 75 commitments have also produced benefits for the organisation itself.

- Relationships with the voluntary sector have been developed beyond existing contacts. This has served to gain greater insights into the needs and experiences of diverse service users. Likewise, it has provided the organisation with an opportunity to impart further information on its role and activities with regards to health and social care in Northern Ireland.
- Staff awareness on autism issues was enhanced through provision of training as part of the delivery on work placements for people with a disability.

2b) Outline the number of equality scheme related consultation exercises undertaken by your authority over the past five years. Set out the number and percentage related to screening exercises and to EQIAs and indicate the extent that your scheme helped you to engage with external stakeholders?

Prompt – Identify your authority's most and least successful means of consultation in relation to s75 categories. Why were some means of consultation more or less successful in relation to particular equality categories?

Over the past five years, the Business Services Organisation carried out two consultation exercises that were directly related to the Equality Scheme. One of these related to an equality screening.

All screenings that the Business Services Organisation published in this period were included in quarterly equality and human rights screening reports, collated on our behalf by the Equality Unit. These were issued to consultees with the invitation to comment.

The Equality Scheme contributed to both widening and strengthening our efforts to engage and consult: the maintenance of a Section 75 master consultation list helped us to include further groups in any mainstream policy consultations. Likewise, screenings and EQIAs contributed to identifying particular groupings for engagement.

Face-to-face engagement continues to be particularly effective both in eliciting views and in building relationships with those impacted by what we do.

More recently, the organisation has drawn on social media to offer young people in particular new ways of engaging with us. This has allowed us to reach a wider range of people, particularly around our counter fraud and probity work.

2c) Indicate if your list of consultees was amended during the 5 year period and what further steps could be taken to develop your level of engagement and consultation?

Prompt - Outline the extent your authority did or did not move away from formal consultation and on what criteria was any such consultation targeted? To what extent were requests to be included and/or objections from those not included in the consultation process received and how were these addressed?

Over the five-year period, the consultation list was updated on a quarterly basis following the issuing of screening reports. Moreover, any requests by consultees to be added to or taken off the list were acted upon. In addition, new emerging groups were added to the list on a regular basis.

As indicated in the previous section, overall, the organisation moved towards focused engagement to add to inclusive formal consultation.

Looking ahead, both the organisation and consultees would benefit from the tighter integration of equality matters into mainstream engagement structures and exercises rather than being undertaken as stand-alone exercises.

2d) To what extent did your authority consult directly with directly affected individuals as well as with representative groups, particularly in relation to young people and those with learning disabilities, and was this sufficient?

Prompt – How effective was your authority at providing feedback to consultees as a result of consultation exercises? What were the lessons learnt in terms of enablers and impediments to

consulting directly with affected individuals? What could your authority do in future to provide effective consultee feedback?

With regards to decisions and policies impacting on staff, the organisation undertook engagement and consultation with targeted staff across the following policies:

- Employment Equality of Opportunity Policy
- Code of Conduct
- Working Well Together
- Grievance
- Disciplinary
- Capability/Competence
- Eye Care/Test Guidelines
- Domestic Abuse
- Drugs, Alcohol and Substance Abuse Policy
- Post Entry Training
- Attendance at Work
- Leave Pack
- Social Media Policy
- Harassment Policy
- Family Pack
- Zero Tolerance Policy
- Health & Wellbeing
- Stress & Mental Health Guidelines
- Secondment Guidelines

- Recruitment and Selection

In relation to policies and decisions impacting on service users, the organisation engaged with representative organisations, such as Carers NI and the Indian Community in relation to the Access to Healthcare project and RNIB as regards Family Practitioner Services.

Furthermore the organisation, facilitated by BSO Equality Unit, undertook direct engagement with a range of representative groups and individuals to inform the development of a Regional HSC Transgender Policy as well as the Accessible Formats Policy.

The organisation followed a robust process for providing feedback to consultees after the completion of consultation exercises. All those who provided comments during the consultation phase were issued the final report. In these, all comments were addressed. For any suggestions that the organisation did not take forward, a rationale was provided.

3. The authority's arrangements for assessing and consulting on the impact of policies adopted or proposed to be adopted on the promotion of equality of opportunity.

3a) Outline and discuss the number of policies your authority subjected to screening over the past five years, setting out the number and percentage of 'policies screened in' on the basis of equality considerations and the percentage 'screened in' on the basis of the good relations duty.

Prompt - What were the lessons learnt in terms of enablers and impediments to screening in terms of, screening criteria and priority factors? Are there any other criteria which could usefully be included? What lessons are there regarding responsibility for screening at regional level and subsequent screening of local policy? What could your authority do in future to ensure effective screening arrangements? Set out in an appendix a list of all policies screened out during scheme implementation.

Over the five year period, the organisation screened a total of 25 policies. Table 3 below provides further details.

Table 3: Policies screened and screening decision

Name of Organisation	2011-2012	2012-2013	2013-2014	2014-2015	2015 (Q1)	Total
Total no of policies	3	9	0	7	6	25
Screening Decision 1 (screened in)	0 (0%)	0 (0%)	-	0 (0%)	0 (0%)	0 (0%)
Screening Decision 2 (screened out with mitigation)	2 (67%)	7 (78%)	-	5 (71%)	4 (67%)	18 (72%)

Screening Decision 3 (screened out without mitigation)	1 (33%)	2 (22%)	-	2 (29%)	2 (33%)	7 (28%)
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All these policies can be viewed on the joint screening website, facilitated by the BSO Equality Unit: <http://www.hscbusiness.hscni.net/services/2166.htm> and will be provided as hard copy on request.

The organisation did not screen in any policies on the basis of the good relations duty.

As the above table indicates, the organisation has progressed during the five year period in relation to the screening of policies and decisions.

Key factors contributing to this progress include:

- staff training
- availability of a number of specialised resources on screening developed by the Equality Unit
- one-to-one in-depth support and advice by equality professionals
- designing and implementing assurance processes, such as quality assurance by Directors/Assistant Directors of quarterly screening reports.

Staff value the centralised screening website maintained by the Equality Unit on behalf of all 11 regional organisations as a source of reference.

The full-length screening template has proved overly burdensome for policies that clearly do not impact on people. In the same way as EQIA reports are only completed for policies likely to have a major impact, full-length screening templates should be reserved for policies likely to have at least a minor impact. The introduction of a

shortened template for policies that do not impact on people would address the risk of screenings being perceived as a paper exercise by policy leads. It would also serve to focus resources on areas where screening can make a difference.

Moreover, while policies and major changes in the delivery of functions are subjected to screening, the need to roll out screening further remains.

The organisation has experienced difficulties when evidence of screening of key policies by other organisations that impact on the work of the Business Services Organisation is not available. This relates in particular to the regional and national level, such as strategies or policies emanating from Departments. It seems fair to say that national decision-makers remain largely unaware of the statutory obligations that are unique to Northern Ireland. In many cases this means that, firstly, essential equality data to inform screenings at local or organisational level is missing.

Secondly, the potential lack of screening when the strategy or policy is developed at regional or national level means that individual organisations do not have the authority to introduce mitigating measures if their assessments show that any Section 75 groups are affected differentially and unfairly by the implementation of the policy. In other words, the ownership of the policy lies outside the organisation as the organisation does not have any scope for making changes to the policy.

Looking ahead

Notwithstanding these general constraints posed by the regional and national level, the organisation recognises the scope for strengthening its own screening activities. To this end, we will seek to introduce the following set of measures:

- Close the loop by policy leads ensuring that screening templates are published
- Increase the number of screenings relating to functions and service areas beyond corporate affairs

- Revisit the scope for introducing a shortened template for evidencing the screening of policies that do not impact on people.

In relation to the regional level, we will

- Seek to engage with DHSSPS policy leads on equality issues at consultation stage of strategies or policies, through the regional equality and human rights steering group.
- Seek to influence others by raising the need for the coordination of screening activities between the DHSSPS and HSC organisations as well as between individual HSC organisations, through the regional equality and human rights steering group.

3b) To what extent did your authority's consideration of the screening criteria **not** identify equal opportunity implications on any of s75 categories, but for which consultees then highlighted problems?

Prompt – Identify the extent the collection of quantitative and qualitative data informed screening processes. Outline the extent consultations with representative groups produced data to inform the screening process which was not otherwise available to your authority. Outline any difficulties in identifying policies and equality implications using the definition of policy set out in the Guide to the Statutory Duties.

In relation to screenings that are published as part of quarterly screening reports, the organisation has to date received few comments from consultees. In the main, these were requests for further information and clarification rather than concerns as to a lack of consideration of particular issues.

The evidence base of screenings of policies that impact on staff has become significantly more robust with the introduction of a new Human Resources IT system, the Human Resources Pay and Travel System (HRPTS). Since then, data on all nine Section 75 groups has been captured and drawn upon.

Summary equality data of our staff is made available to staff undertaking screenings on a quarterly basis.

At the same time, the BSO recognises that the quality of staff data lags behind on some of the groupings. HRPTS relies on staff providing diversity data by means of a self-service. Staff completion rates are particularly low in relation to the categories of dependants, disability, sexual orientation, political opinion, and ethnicity.

For this reason, a dedicated campaign encouraging staff to complete the data was scheduled for Quarter 4 of 2015-16.

With regards to data collected to identify impacts on service users, progress has been made for policies that impact on the wider NI population as Census 2011 data became available.

Efforts to harmonise the collection of ethnic monitoring data across HSC IT systems, driven by the Health and Social Care Board in recent years, should begin to bear fruit in the coming years. It will be essential to roll out region-wide data collection to IT systems beyond those prioritised initially.

Fundamental gaps remain, moreover, as to the collection and collation of equality data at regional level in relation to other equality groups, including on carers and trans people.

As regards data becoming available as a result of consultations, this mainly relates to qualitative data on the needs and experience of service users.

The organisation would hold that the all-inclusive definition of a 'policy' as set out in the Commission's Guide to the Statutory Duties has over time caused less of a difficulty than initially. This is largely due to awareness raising and training measures.

3c) Outline over the past five years how many EQIAs your authority commenced as a result of i) initial screening and ii) as a result of screening new/revised policies subsequently, and discuss the extent that your authority has become more effective at identifying equality of opportunity dimensions in its policies.

*Prompt – Were changes made to the screening process?
Outline any examples of any changes made to policies to better promote equality of opportunity and/or good relations, rather*

than to address any perceived differential impact, as a result of screening policies that were 'screened out'?

The organisation did not undertake any EQIAs during the five year period.

3d) Outline over the past five year period the percentage of your authority's initial EQIA timetable that reached i) stage 6 of the EQIA process i.e. decision making, and ii) stage 7 of the EQIA process i.e. annual monitoring & publication of results, and indicate the extent that your authority has become more effective at progressing EQIAs.

Prompt – Explain any slippage that occurred and what was done to rectify it. To what extent did you notify representative groups of this slippage and what was their reaction? What were the lessons learnt in terms of enablers and impediments to monitoring EQIAs?

Not applicable.

4. The authority's arrangements for monitoring any adverse impact of policies adopted by the authority on the promotion of equality of opportunity.

4a) To what extent were sufficient arrangements put in place to collect data relating to the nine equality categories to monitor the impact of policies and what could your authority do in future to develop monitoring arrangements?

Prompt - What were the lessons learnt in terms of enablers and impediments to monitoring and developing new/additional quantitative data over the past five years. Did your authority consult its own employees or collaborate with other authorities to collect data? Did your authority engage with representative groups to develop monitoring arrangements?

Appropriate arrangements for monitoring staff impacts of policies were put in place with the introduction of HRPTS (see section 3b).

Likewise, in some divisions robust monitoring arrangements have been established. Examples of monitoring undertaken include

- absence figures – staff health and wellbeing work (development of mental health training)
- Counsel panel members
- Research Ethics Committee members.

At the same time, the most recent Annual Progress Report evidenced that monitoring is undertaken in practice only to a limited extent.

This may be due to staff not necessarily making the link between monitoring and service improvement, equality and quality.

The mainstreaming at DHSSPS-level of the requirement for HSC organisations to include equality data in relation to service reporting (including on performance) and the aggregation of such data for Northern Ireland as a whole could serve as a strong driver to progress on equality monitoring.

5. The authority's arrangements for publishing the results of equality impact assessments and of monitoring any adverse impact of policies adopted by the authority on the promotion of equality of opportunity.

5a) Indicate the number of reports published outlining the results of EQIAs and monitoring over the past five years, and outline what your authority could do in future in relation to improving the publication of EQIA results and monitoring.

Prompt – Identify the number of reports that were provided in alternative formats. What were the lessons learnt in terms of enablers and impediments to publishing the results of EQIAs and monitoring?

Not Applicable.

6. A commitment that in making any decision with respect to a policy adopted or proposed to be adopted by it, that the public authority shall take into account any equality impact assessment and consultation carried out in relation to the policy.

6a) In terms of the number of EQIAs that reached stage 6 (i.e. decision making) to what extent were mitigation measures and alternative policies adopted?

*Prompt - Outline the extent to which your authority produced EQIAs that did **not** identify adverse impact on any of s75 categories, but which consultees then gave an indication of adverse impact of s75 category and/or proposed mitigation measures or alternative policies.*

Not Applicable

6b) To what extent did consideration of EQIAs and consultations contribute to a change in policy, as opposed to policy decisions which would probably have been made in any event by your authority?

Prompt - Set out any key examples. What were the lessons learnt in terms of enablers and impediments to making a decision and taking into account an EQIA and consultation? What could your authority do in future to ensure decision making effectively takes these issues into account?

Not Applicable

7. The authority's arrangements for training staff on issues relevant to the duties.

a) To what extent were sufficient arrangements put in place to develop and deliver a training programme in accordance with scheme commitments?

Prompt - Was the training programme focused on the initial period of scheme implementation or did it effectively cover all five years? To what extent were outside trainers from representative groups used in designing or delivering training?

Was focused training for staff in management and roles associated with aspects of scheme implementation provided on an ongoing basis?

The Business Services Organisation and its partners implemented a comprehensive training programme over the five-year period. A training plan was developed on an annual basis jointly by the Equality Unit and all partner organisations, thus ensuring the continuing learning and development of staff in relation to equality, good relations and human rights throughout the period.

The following tables give an overview of the type of training and awareness raising delivered and its timing over the five year period.

Table 4: Number of staff attending face-to-face training during the five year period by type of session.

Type of Session	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016 (Q1)
Equality and Human Rights Screening	4	29	10	19	
Disability Training				41	
Equality Awareness Training		1		31	
Equality Action Plan review and Disability Action Plan development		8			
Introduction to Equality Impact Assessment			8		
Senior Equality Scheme Briefing	14			2	
Equality and Diversity Workshop					11

Induction					34
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Table 5: Number of staff completing eLearning training during the five year period by module.

<u>E-Learning Training Record</u>					
ELearning	2011-12	2012-13	2013-2014	2014-2015	2015 (Q1)
Module 1 to 4 – Diversity –	26	62	23	83	0
Module 5 – Disability	23	60	20	69	0
Module 6 – Cultural Competencies	n/a	0	20	65	0

All training sessions were evaluated on a routine basis. It showed that staff found the sessions effective in meeting the set aims and objectives.

External trainers from representative groups were commissioned to design and deliver focused training on Autism Awareness, Mental Health awareness and wellness (including stress), Lesbian, Gay, Bisexual and transgender Awareness.

A rolling programme of specialised training was provided on particular aspects of equality scheme implementation including screening and EQIAs.

The economies of scale achieved by the partnership arrangements were particularly pronounced in the area of training, allowing the organisation to meet the training needs of staff in a highly cost-effective manner. It also allowed shared learning across partner organisations. This has enabled more staff to avail of face-to-face classroom based training than may have otherwise been the case.

Alongside face-to-face training, considerable efforts were spent on developing eLearning programmes within the Discovering Diversity framework. Table 5 provides details on the number of staff who completed a range of modules within the framework.

In addition, staff were facilitated in accessing an eLearning programme on sexual orientation and gender identity, developed by the Public Health Agency.

7b) Have all staff received awareness training and what could your authority do in future to deliver an effective training programme?

Prompt – Does the authority have evidence that over the past five years staff understood their role in implementing the scheme? What were the lessons learnt in terms of enablers and impediments to communication and training?

Following initial focus on raising staff awareness on the Equality Scheme commitments (including through information materials in easy to understand format) efforts shifted in the later part of the five year period to raising awareness on needs and experiences of one particular group under Section 75, namely people with disabilities.

This was undertaken by a series of awareness days, in the main linking in with international awareness days and weeks.

Given the effectiveness of this format the organisation will explore the scope for building on this in relation to other Section 75 groups.

Moreover, it is envisaged to complement the existing eLearning portfolio by development of a new module on general equality awareness.

8. The authority's arrangements for ensuring and assessing public access to information and to services provided by the authority.

8a) To what extent were sufficient arrangements put in place to ensure and assess public access to information and to services provided by the authority?

Prompt - Was an audit of information provision undertaken? To what extent did you provide accessible formats without specific requests? What were the lessons learnt in terms of enablers and impediments to ensuring and assessing public access to information and to services? What could your authority do in future to ensure equality of opportunity in public access to information and to services?

All Section 75 related documents (including consultation documents, screening reports, correspondence with staff and service users) follow RNIB guidance. This involves, for instance, the use of Arial font size 14 and left alignment.

Examples where alternative formats were produced up front included:

- Audio Format and Signed DVD of Disability Action Plan
- Easy Read versions of Service User Information around eligibility to HSC Services.

In addition, by end June 2015, planning communication on accessing interpreting services was under way.

Looking ahead, it will be vital that staff engage closely with individuals and representative groups to agree priorities in providing accessible information.

Issues relating to access to services were examined in the context of individual equality screenings.

9. The authority's timetable for measures proposed in the scheme.

9a) Outline the extent to which measures set out in the original timetable have been implemented. Any detailed information should be included in as an appendix to the report.

Prompt –Update any progress previously reported as underway or delayed. Has a mechanism been developed to report by exception i.e. on specific issues that have not been progressed?

The Business Services Organisation implemented the measures that were set out in the original timetable (as per the relevant Appendix in the Equality Scheme) as planned with one exception. This relates to monitoring.

While the audit of information system was completed within Year 1 of scheme implementation, the annual review and publication of monitoring information remains behind schedule.

9b) If your authority was to be reconstituted in the next five years what would be the main scheme actions/equality considerations that an incoming authority should address? Any detailed information should be included as an appendix to the report.

Prompt –Outline what arrangements could be put in place to transfer equality scheme knowledge.

The Business Services Organisation would recommend that any incoming authority should pay particular attention to further embedding and mainstreaming work in the following areas of scheme implementation:

- screening and EQIAs

- monitoring.

Particular efforts should be placed on regional cooperation on equality screenings and EQIAs (top down and horizontally) as well as on monitoring.

10. Details of how the scheme will be published.

10a) Were scheme commitments in this section delivered and what evidence supports this view?

The Business Services Organisation closely followed its commitments for publishing the scheme:

- Systems were put in place for making the scheme available on request in alternative formats. Providers of translation services and services to produce the scheme in further alternative formats (including Braille and formats for Young People) were identified.
- An Easy Read version and an easy to understand summary of the scheme were produced.
- The scheme and its alternative versions were published on the organisation's website.
- Communication on the availability of the scheme was disseminated widely including to consultees.

11. The authority's arrangements for dealing with complaints arising from a failure to comply with the scheme.

11a) Outline the number and nature of complaints received by your authority, and what your authority could do in future to develop its complaints handling process and learn from complaints.

Prompt – Outline the nature of complaints and scheme element e.g. screening, consultation. What effect did complaints have on the operation of your scheme?

A complaints procedure for dealing with Section 75 complaints is set out in the organisation's Equality Scheme. The organisation did not

receive any complaints under the terms of Section 75 throughout the five-year period. If any complaints are received under Section 75, they are directed to the organisation's Complaints Manager, who will report and monitor the level of complaints on an annual basis.

12. A commitment to conducting a review of the scheme within five years of its submission to the Equality Commission and to forwarding a report of this review to the Equality Commission.

12a) What has been your authority's experience of conducting this review? To what extent has the Commission's guidance been useful in undertaking the review?

The review has proved a time and resource intensive undertaking. The template contains some 25 main questions plus a further 50 questions as prompts, which overall seems somewhat excessive and unwieldy. A theme-based approach (focusing, for instance, on ownership, equality proofing, monitoring and consultation) rather than following the intricate structure of the guidance on the form and content of Equality Schemes, may be preferable.

At the same time, the review served as an opportunity to hold discussions with senior staff and to jointly reflect on progress on equality matters. This in turn helped to raise the profile of the equality mainstreaming agenda.