

# **EQUALITY COMMISSION FOR NORTHERN IRELAND**

## **Public Authority Annual Progress Report 2006 - 2007**

This report template includes a number of self assessment questions regarding implementation of the Section 75 statutory duties from **1 April 2006 to 31 March 2007**. Please enter information at the relevant part of each section and ensure that it is submitted electronically (by completing this template) and in writing, with a signed cover letter from the Chief Executive or, in his/her absence, the Deputy Chief Executive to the Commission by **31 August 2007**.

Name of public authority (Enter details below)

**Department of Health, Social Services and Public Safety**

Equality Officer (Enter name and contact details below)

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### **Executive Summary**

- **What were the key policy/service developments made by the authority during this reporting period to better promote equality of opportunity and good relations?**

The key policy/service developments listed contribute to the promotion of equality of opportunity and good relations by seeking to address the needs and circumstances of particular groups particularly in terms of access issues and health inequalities.

- Waiting times for surgery and outpatient appointments continued to decrease during 2006/2007
- A suicide prevention strategy "Protect Life-A Shared Vision" was launched.
- Smoke free legislation was introduced from April 2007.
- The 'Fit Futures' plan was launched which involves joining up health, education and sport in seeking to reduce obesity in children.
- Quality Standards for Health and Social Care have been produced which will enable the Regulation & Quality Improvement Authority (RQIA) to provide an assessment of compliance with obligations & legal requirements, in terms of equality & human rights.
- A Pilot Project began in February 2007 to explore the potential for providing certain complementary and alternative medicine and therapies on the health service
- A programme was developed to resettle patients from learning disability hospitals into community settings.
- Funding continues to be provided to maintain and enhance the Regional Interpreting Service.
- Funding provided for the production of a multi-language information booklet for migrant workers and minority ethnic communities.
- Providing access to health protection and promotion information leaflets in different languages.
- Funding was provided to the Women's Aid Federation NI to support an Equality of Access Project which started in October 2006.
- Funding of £84k was allocated to Rainbow to fund a two year project on sexual health/mental health promotion.

- **What are the main initiatives planned in the coming year to ensure the authority improves outcomes in terms of equality of opportunity and good relations for individuals from the nine categories covered by Section 75?**

The Department will continue place a high priority on addressing unacceptable health inequalities by making services more accessible and responsive in order to improve outcomes for individuals. To this end the main initiatives for the coming year will revolve around the setting of challenging new targets to cut waiting times for a range of health and social care services; the development of fully integrated care and support in the community for those people most at risk and improvements in emergency care and children's services.

Implementing the Suicide Prevention strategy and re-shaping mental health services so that people have rapid access to specialist support services in their community will be another priority.

In addition, the public health strategy 'Investing for Health' which aims to improve health and wellbeing of all the population and reduce health inequalities, is being reviewed in the coming year to see if it is still fit for purpose and to identify any other actions which need to be taken .

Some other specific initiatives are cited below.

### **Service frameworks**

The Department will introduce a range of service frameworks, each of which will help reduce inequalities in health, well-being and service access and delivery by setting a benchmark for the performance and quality of services as well as articulating the standards of care each member of the population can expect to receive. Work is underway on frameworks for cardio-vascular health and well-being, respiratory health and well-being

and cancer treatment and care, to be followed by frameworks for mental health and learning disability services.

## **Mental Health and Learning Disability Board**

A new Mental Health and Learning Disability Board will be set up to act as champion for people with mental health and learning disabilities. The new Board will drive forward implementation of the recommendations flowing from the Bamford review of mental health and learning disability.

### **Bamford Review - [Human Rights and Equality Report](#)**

The Review's Human Rights and Equality Group published a report in October 2006 which sets out a number of recommendations for several Departments and public bodies in Northern Ireland, covering issues such as access to rights, entitlement to vote, and to lifelong education and learning opportunities. It also includes a series of recommendations around involuntary detention in hospital, including a patient's rights to representation at a Mental Health Review Tribunal and for a statutory right to independent advocacy support. Implementation of these recommendations will start in 2007/2008

### **Review of autism services**

The Department will undertake a review of autism services across Northern Ireland. The objective will be to identify gaps in service provision and share best practice. It is likely that one of the key areas will be the promotion of awareness of autism and this should allow a fuller integration into society.

### ***Embracing Diversity Good Practice Guide***

The Department is planning to publish a second edition of the good practice guide on the employment of ethnic minority staff. The guide will outline how health and social care organisations can best go about tackling racial harassment of ethnic minority staff including those from overseas.

## **Racial Equality in Health and Social Care – A Good Practice Guide**

A second edition of the good practice will be published. The guide will help to ensure that the services provided meet the needs of all sections of our community, including people from black and minority ethnic and Traveller backgrounds.

## **Embracing Religious Diversity**

Proposals from the Good Relations working group for embracing religious diversity within the Health and Social Care workforce are expected to be implemented.

## **Multi-language information booklet**

A new booklet providing key information about health services in English and in thirteen other languages was completed during the year and was launched by the Minister in June 2007. This will promote better access to health and social services in Northern Ireland for migrant workers and minority ethnic communities.

## **Section 1: Strategic Implementation of the Section 75 Duties**

- **Outline evidence of progress made in developing and meeting equality and good relations objectives, performance indicators and targets in corporate and annual operating plans during 2006-07.**
- 1.1. The [Department's Business Plan for 2006/2007](#) continued to reflect the importance of promoting equality by highlighting equality and inequalities as key policy drivers. In keeping with a mainstreaming approach to equality, it was recommended in the business plan that it should be "read alongside the Department's Equality Scheme".

- 1.2. The business plan committed to a range of objectives and targets surrounding the promotion of equality and social inclusion. These included targets to promote equitable access to health and social services by reducing waiting times for appointments and treatments; to reduce the gap in life expectancy; to target resources more effectively towards people and groups in greatest social need, and to promote healthier lifestyles thus reducing the potential for health inequalities.
- 1.3. Reducing health inequalities was one of the outcomes expressed in our Public Service Agreement (PSA) set out in [Priorities and Budget 2005-2008](#). The PSA refers to equitable access to life-saving interventions and equitable access to high quality, modernised acute, primary and community care services on a regional and local basis.
- 1.4. In the [Department's Priorities for Action Planning Framework](#) which outlines the key priorities for health and social services for 2006-2008, the Minister, in his foreword, referred to changes being made that would ensure greater equality of access to health and social services. Early prominence was given to equality in the document with references to the allocation of funding to reflect the balance between the different needs of respective populations, taking account of age and gender and other factors such as deprivation and the additional costs associated with delivering services in rural areas. The equality section also stressed the need for the Health and Social Care Trusts to ensure that services were accessible to the whole community including those who do not have English as a first or competent second language.
- 1.5. The target outcomes set out in the document focused on the needs of different groups of people, for example, halting the rise in obesity in children, reducing the rate of births to teenage mothers, reducing the standardised suicide rate and reducing the difference in tooth decay levels in 5 year old children.
- 1.6. The Investing for Health Strategy (IfH), launched in March 2002, continued to represent the longer-term approach to tackling the factors which adversely affect health and perpetuate health inequalities. The IfH strategy contains a framework for action to

improve health and well being and reduce health inequalities based on a partnership approach between Government Departments, public bodies, local communities, voluntary bodies, District Councils and the social partners.

- 1.7. Progress was made on a number of fronts and most notably on introducing smoke free legislation from April 2007. Smoking is a major cause of health inequality in Northern Ireland and is the principal factor in the gap in life expectancy between rich and poor. In December 2006, the Minister announced an allocation of £480,000 to HSS Boards to improve smokers' access to Nicotine Replacement Therapy (NRT). The funding will enable over 200 community pharmacies throughout Northern Ireland to provide a one-stop specialist smoking cessation service, from December 2006.
- 1.8. Waiting times for surgery and outpatient appointments continued to decrease during 2006/2007. Following the achievement of the waiting time targets for 2006/07, the Minister is committed to reducing waiting times for assessment and treatment further over the coming year. New targets have been set to ensure that, by March 2008, no patient will be waiting more than 13 weeks for a first outpatient appointment and no more than 21 weeks for inpatient or day case treatment.
- 1.9. During the year a significant step was taken to tackle obesity in children with the launch of the 'Fit Futures' plan which involves joining up health, education and sport in seeking to reduce obesity in children. The prevalence of obesity is not evenly distributed throughout the population and people from some sections of society are more likely to be obese, have a poor diet or to be insufficiently active. One of the key outcomes of "Fit Futures" is to ensure that disadvantaged communities are supported to address inequalities in health.
- 1.10. A suicide prevention strategy "Protect Life-A Shared Vision" was launched during the year, setting out a programme for action to reduce the suicide rate in Northern Ireland, focusing particularly on young males and other groups most at risk. There are approximately 150 suicides in Northern Ireland each year and just over 40% of these are young men aged under 35 years.

- 1.11. A range of Quality Standards for Health and Social Care have been produced which will enable the Regulation & Quality Improvement Authority (RQIA) to provide an assessment of compliance with obligations & legal requirements, in terms of equality & human rights.
- 1.12. A Pilot Project began in February 2007 to explore the potential for providing certain complementary and alternative medicine and therapies on the health service – these services (e.g. chiropractic, osteopathy and homeopathy) have not previously been available on referral from GPs. The projects are based in East Belfast and Shantallow, Londonderry to ensure that both sections of the community have access to the services offered. The pilot is open to both men and women in the relevant GP practices and treatment is free of charge to ensure all participants have equal access to the therapies provided.
- 1.13. A programme has been developed which will resettle patients from learning disability hospitals into community settings and will support their integration into society; help them to realise their full potential and allow them to enjoy independent living supported by the appropriate range and level of health and social care services. The needs of the patients' carers and families will also be addressed through the provision of respite care.
- 1.14. In October 2006 a draft [strategy and action plan to Promoting Equality, Good Relations and Human Rights](#) in Health and Social Care was launched for consultation. The responses to the consultation indicated general support for the proposed strategy. The need for the strategy and action plan was driven by the existence of health inequalities; by equality of access problems; by population changes and, in particular, by Section 75 of the Northern Ireland Act 1998 and the Human Rights Act 1998. The strategy and action plan, which will be published in 2007/2008, will contain a number of objectives, targets and expected outcomes that will contribute to reducing inequalities and providing equitable access to health and social services. Highlighting the importance of the strategy, the health Minister at the time said: "We want to deliver a health and social care service that is characterised by openness, integrity and fair treatment for all. This strategy has been designed to support that ethos".

1.15. The Department has also contributed to a range of inter-departmental strategies and implementation plans including the Racial Equality Strategy and *A Shared Future*.

## Section 2: Screening

- Provide an update of new/proposed/revised policies screened during the year.

2.1. A total of 54 policies were screened during the year. In many instances the screening decisions on the policies listed below were informed by the outcomes of consultations which took place during the policy development and review processes. However, to ensure that consultation takes place on the outcomes of all screening decisions, the list of policies below are being issued for consultation on 8<sup>th</sup> May 2007 and will accessible at:

<http://www.dhsspsni.gov.uk/showconsultations?txtid=24113>

Title of policy subject to screening	Was the <u>F</u> ull Screening Report or the <u>R</u> esult of initial screening issued for consultation? Please enter <u>F</u> or <u>R</u>	Was initial screening decision changed following consultation? <u>Y</u> es/ <u>N</u> o	Is policy being subject to EQIA? <u>Y</u> es/ <u>N</u> o? If yes indicate year for assessment.
Accreditation Scheme for Non-regulated Organisations Working With Children	R	No	No
Adoption strategy			Yes 2006/07
Agenda for Change relating to pay & conditions of HSSPS staff			No

Amendment to the provision of the immigration rules affecting postgraduate doctors and dentists, and the Highly Skilled Migrant Workers Programme			No
Capitation Resources Formula			Yes 2007/2008
Care Matters in Northern Ireland – a bridge to a better future	R	No	No
Changes to the NHS redundancy arrangements			No
Diabetic retinopathy screening programme			No
Draft Smoking (Northern Ireland) Order 2006	F	No	No
Electronic Referrals Management System - service centre location			No
Establishment of a regional Safeguarding Board for Northern Ireland	R	No	No
Health for all Children – Guidance and principles of practice for Professional Staff	F	No	No
Hearing screening programme for newborns			No
HPSS Human Resource Framework			Yes 2006/07
Integrated Elective Access Protocol			No
Interim Pandemic Influenza Contingency Plan - revised version			No
New Strategic Direction	R	No	No

on Alcohol and Drugs 2006-2011			
NICE (National Institute for Health and Clinical Excellence) final appraisal determination (FAD) on the use of trastuzumab (Herceptin) in the treatment of early breast cancer			No
NICE clinical guideline on anaemia management in people with chronic kidney disease			No
NICE clinical guideline on urinary incontinence in women			No
NICE FAD on the use of statins for the primary prevention of cardiovascular disease (CVD) in adults and for the treatment of adults with established CVD			No
NICE FAD on the use of Bevacizumab & Cetuximab for the treatment of metastatic colorectal cancer			No
NICE FAD on the use of inhaled insulin for the treatment of diabetes (types 1 & 2)			No
NICE FAD on the use of methadone and buprenorphine as a treatment for the management of opioid dependency			No

NICE FAD on the use of naltrexone as a treatment for relapse prevention in drug misusers			No
NICE FAD on the use of peginterferon alfa and ribavirin for the treatment of mild chronic hepatitis C			No
NICE FAD on the use of rituximab for the treatment of follicular cancer			No
NICE FAD on the use of docetaxel for the adjuvant treatment of early node-positive breast cancer			No
NICE FAD on the use of paclitaxel for the adjuvant treatment of early node-positive breast cancer			No
NICE guidance on the use of docetaxel for hormone-refractory metastatic prostate cancer			No
NICE guidance on the use of efalizumab and etanercept for psoriasis			No
NICE guidance on the use of Etanercept and Infliximab for Psoriatic Arthritis			No
NICE technology appraisal on laparoscopic surgery for colorectal cancer			No
Personal social services development and training strategy 2006 - 2016			No
Physiotherapy placements			No
Primary Dental Care			No

Strategy			
Proposal for a draft health services Primary Care (amendment) (Northern Ireland) Order			No
Proposals for a joint committee for commissioning	R	No	No
Regional Cancer Framework			Yes 2006/07
Regional Transport Services Strategy			No
Review of HPSS Superannuation Scheme			No
Routine antenatal screening for HIV			No
Safeguarding Vulnerable Groups Act 2006	R	No	No
Sexual Health Strategy			Yes 2006/07
Shared Services concept			Yes 2007/08
Social work student incentive scheme			Yes 2006/07
Social Work Student Incentive Scheme – amendments to DEL Student Funding Regulations 2006			No
Temporary location of the new Belfast Trust Headquarters	F	No	No
Temporary location of the new Northern Trust Headquarters	F	No	No
Temporary location of the new South East Trust Headquarters	F	No	No
Temporary location of the new Southern Trust	F	No	No

Headquarters			
Temporary location of the new Western Trust Headquarters	F	No	No
The Northern Ireland Suicide Prevention Strategy 2006-2011. Protect Life - A Shared Vision”	F	No	No
Strategy and Action Plan to promote equality, good relations and human rights.	R	No	

### Section 3: Equality Impact Assessment (EQIA)

- Provide an update of policies subject to EQIA during 2006/07, stage 7 EQIA monitoring activities and an indicative EQIA timetable for 2007-08.

#### EQIA Timetable – April 2006 - March 2007

Title of Policy EQIA	EQIA Stage at end March 07 (Steps 1-6)	Outline adjustments to policy intended to benefit individuals, and the relevant equality & good relations categories due to be affected.
Adoption strategy	6	None, but commitments given to monitor the operation of permanence options for looked-after children to ensure older young people are not disadvantaged and to liaise with relevant stakeholders to identify how to better consider religious, racial and gender equality impacts in the future. A database has been proposed that will provide much better information on how adoption services impact on s75 groups.
HPSS Human Resource Framework	6	Changes were made to the HPSS HR Framework and the EQIA report as a consequence of the consultation. These are identified in the summary of response given in the EQIA report which can be accessed at <a href="http://www.dhsspsni.gov.uk/index/hs/rpa-home/rpa-staffing-issues.htm">http://www.dhsspsni.gov.uk/index/hs/rpa-home/rpa-staffing-issues.htm</a> . An example of changes was a strengthening of references to disability and reasonable adjustments as a consequence of Disability Action's response. Another was the widening of redeployment opportunities across the public sector following comments from

		the Public Services Commission (PSC).
Regional Cancer Framework	6	<p>The following recommendations were made as a result of the EQIA:</p> <ul style="list-style-type: none"> <li>• that cancer prevention campaigns and screening programmes be targeted to mitigate against any potential adverse impact, particularly in relation to the protestant community, people separated/ widowed/divorced, those without dependent children and disabled people;</li> <li>• that commissioners and service planners should expand provision of out of hours services, including palliative care services, to promote equality of access to these services for the whole population;</li> <li>• that the future needs for radiotherapy services should continue to be kept under review and that, following detailed analysis, future services development should be located at the optimal location to meet the requirements of all Section 75 equality groups;</li> <li>• that commissioners, working with the cancer units and the cancer centre, should consider developing and implementing oncology outreach posts to mitigate against any potential adverse impact to the catholic and nationalist community in relation to accessibility to cancer unit</li> </ul>

		<p>services;</p> <ul style="list-style-type: none"> <li>that commissioners should monitor the impact of cancer unit developments to ensure that Section 75 requirements are met for all equality groups.</li> </ul>
Social work student incentive scheme	6	None
Sexual Health Strategy	5	
Capitation Resources Formula	2	

Ongoing EQIA Monitoring Activities April 2006- March 2007

<b>Title of EQIA subject to Stage 7 monitoring</b>	<b>Indicate if differential impacts previously identified have reduced or increased</b>	<b>Indicate if adverse impacts previously identified have reduced or increased</b>

2007-08 EQIA Time-table

<b>Title of EQIAs due to be commenced during April 2007 – March 2008</b>	<b>Existing or New policy?</b>	<b>Please indicate expected timescale of Decision Making stage i.e. Stage 6</b>
Shared Services concept	New	2008/2009

- **Where the EQIA timetable for 2006/07 (as detailed in the previous annual S75 progress report to the Commission) has not been met, please provide details of the factors responsible for delay and details of the timetable for re-scheduling the EQIA/s in question.**

3.1. The EQIA timetable for 2006/07 was met.

#### **Section 4: Training**

- **Outline training provision during the year associated with the Section 75 Duties/Equality Scheme requirements including types of training provision, numbers attending, and conclusions from any training evaluations.**

#### **Section 75 Learning and Development Action Plan**

- 4.1. A Section 75 Learning and Development Action Plan was developed for 2006/2007. It was designed to equip staff with the appropriate skills and knowledge to enable them to continue to comply with the statutory equality obligations set out in section 75. The focus of the actions was on awareness-raising and training for s75-screening and the key outputs are described below.
- 4.2. In November 2006 a lunchtime seminar was held to raise awareness of Section 75. The title of the event was Equality at Work and the theme was "Section 75 equality duty and what it means for our day to day work". A total of 23 staff attended and formal feedback indicated a high level of satisfaction with the event.
- 4.3. Efforts continued to raise the profile of Section 75 through the normal departmental briefing arrangements which consist of a monthly intranet publication entitled "Team Talk" and monthly team meetings. Information about the review of the equality scheme and the region wide screening and EQIA programme were published in June and September 2006 editions of Team Talk.
- 4.4. A series of training seminars on screening was completed in April 2006. Sixty-three people attended this training. Formal evaluation showed that 100% of staff were content that the course met its aim/objectives; with 85% feeling it met the aim very well or extremely

well. The majority of those who attended indicated that they would be more aware of section 75 and their obligations when developing and reviewing policies. Many said they would share what they learned with colleagues and a number indicated that they would be approaching the Department's Evaluation and Equality unit for advice in the future. A number of staff also indicated that they would be revisiting policies in their area to look at the screening decisions / process.

- 4.5. The Department's Equality Screening/EQIA Information Pack was updated during the year. It is available to staff as a source of information and guidance and includes examples of screenings and EQIAs as well as useful contacts and websites.
- 4.6. The [Equality WebPages](#) are regularly updated and are also a useful source of information and advice on section 75 matters.
- 4.7. In February 2007 opportunities for urgent training on screening and EQIAs were offered to all staff. The training was delivered by the Centre for Applied Learning.

## **Induction**

- 4.8. The statutory equality duties are an integral part of induction training for new staff. This emphasises the Department's commitment to equality and the duty, and the role that each member of staff has in contributing to meeting the section 75 requirements. These range from being aware of the needs of different groups to undertaking equality impact assessments. Induction also covers the role of the Equality Commission and sources of relevant information. Our online induction package has a section devoted to the awareness and understanding of Equality, Diversity and Human Rights and new staff are guided through this on their arrival in the Department.

## **Protecting Dignity at Work Training**

- 4.9. 'Protecting Dignity at Work' training has been implemented throughout the Department to ensure clear understanding of the Department's Harassment Policy and of the employer's and employee's rights and responsibilities under the policy. Ongoing

arrangements are in place to ensure that all staff new to the Department have Protecting Dignity at Work training and quarterly training sessions are arranged which include all staff who have joined the Department in the previous 3 months. The 'Protecting Dignity at Work' policy is available online for the information of all staff.

### **Diversity input to Leadership and Management Development training**

4.10. Diversity is a key element of a mandatory business unit of the NVQ standards and the Department has delivered NVQs to increasing numbers of staff at both the administrative and support grades. A specific Unit within the NVQ programme delivered by the Department focuses on 'Supporting Diversity,' within the context of raising understanding of the organisation's business and priorities.

### **Criterion Based Interview (CBI) Panel Training**

4.11. Equality/ Diversity awareness is a major aspect of the CBI panel training which this Department delivers in-house to all staff as appropriate. In line with the requirements of the Civil Service Commissioners the session on Equality/Diversity is included in the 'refresher' CBI training also and all training is delivered in accordance with Recruitment Policy and Procedures.

### **Organisation of Learning and Development Events**

4.12. Consideration is given when organising events to the availability of staff with different working patterns (e.g. part time hours).

## **Section 5: Communication**

- **Outline how the authority communicated progress on delivery of the statutory duties during the year and evidence of the impact/success of such activities.**

### **Website**

4.1. The Department's website includes a section devoted to [Equality](#), which is regularly updated. It affirms the Department's commitment to

promoting equality, and includes copies of the Department's Annual Reports to the Equality Commission, the report on the outcome of the review of its Equality Scheme and importantly, it provides an up to date picture of progress on the Department's Screening and EQIA programme.

- 4.2. In May 2006 the Department wrote to all those on the Department's consultation list drawing their attention to the accessibility of the Screening/EQIA programme on our website, and offered the option of email alerts whenever the programme is updated.

### **Regional Equality Liaison Panel and the Equality and Human Rights Steering Group**

- 4.3. Progress on delivery of the statutory duties is a standing item for meetings of both the Regional Equality Liaison Panel and the Equality and Human Rights Steering Group (EHRSG). The former brings together Department officials and key section 75 umbrella groups such as NICEM, Age Sector Reference Group, the Men's Project, Women's Resource & Development Agency. The EHRSG is made up of equality leads from the Department and from the Health and Social Care family of organisations, and provides a valuable forum for discussion and dissemination of information on progress on the delivery of the statutory duties.

### **Consultation**

- 4.4. The Department also used the consultation exercise (October 2006 – January 2007) on its draft strategy and action to promote equality, good relations and human rights as an opportunity to communicate how it was delivering on Section 75.

### **Workshop**

- 4.5. In October 2006 a workshop was held to provide the opportunity for HPSS equality and human rights officers to meet and discuss:
  - issues arising from the review of Equality Schemes;

- collaborative working and the region-wide Screening/EQIA programme; and
- implementation of Strategy and Action Plan to promote equality and human rights.

4.7. A number of actions were agreed at the workshop including the setting up of a good relations working group (referenced under Section 10) and sharing good practices in screening which is being taken forward in 2007/2008 taking account of the outcome of the s75 Effectiveness Review.

## **Section 6: Data Collection & Analysis**

- **Outline any systems that were established during the year to supplement available statistical and qualitative research.**
- **Outline any research undertaken/commissioned to obtain information on the needs and experiences of individuals from the nine categories covered by Section 75.**

### **Information and Analysis Directorate**

6.1. The Department's Information and Analysis Directorate continued to provide technical advice and data in support of the Equality programme and initiatives including coordination of update to nine S75 information guides and equality information gap analysis.

### **Inequalities Monitoring System**

6.2. The Directorate maintains the Inequalities Monitoring System which comprises a basket of indicators which are monitored over time to assess area differences in morbidity, utilisation of and access to health and social care services in Northern Ireland. Inequalities between the 20% most deprived electoral wards and Northern Ireland as a whole are measured with deprived areas identified from an update of the Noble Income domain for current ward boundaries. Results for 20% most rural areas were also compared against

Northern Ireland overall using population density from the 2001 Census of Population as a measure of rurality. There are plans to complete update of Inequalities Monitoring System in 2007/08 (including review of indicator population base, service locations, etc) and publish report incorporating both trend and equality analyses.

### **Person-centred Community Information System (PCIS)**

- 6.3. Firm plans are in place for the establishment of a Person-centred Community Information System (PCIS) which aims to establish a single integrated community health and social care record for all patients and clients in receipt of community based health and social care services. It will have the ability to record all data required to enable HSC Trusts to monitor equality of opportunity in accordance with section 75.

### **Public Consultations**

- 6.4. Public consultations routinely include a question seeking evidence – qualitative or quantitative - to inform the equality screening processes.

### **Public Attitudes Survey**

- 6.5. The latest [public attitudes survey](#) was carried out in 2006 and involved interviews with around 1500 people. Its purpose was to gauge the level of satisfaction with Health and Social Services in Northern Ireland and to identify those areas in which the public would like to see changes and improvements. Access to information and services is a key feature of the surveys. Respondents were asked if they felt that health and social care services treated all groups fairly. And which group or groups they believed were treated less favourably? 70% believed that the health service treats all groups fairly; of those respondents who identified a group as being treated unfairly by health and social services, 44% believed that elderly people are treated less favourably. The full survey results are available on the Department's website.

## **Children with Complex Needs**

6.6. The Department commissioned a report to Develop the Nursing Response to Children with Complex Needs. The ethos behind this was to ensure that Nursing services are facilitated to fully support and respond to children with complex needs and their families in partnership with other professions and agencies. It provided an opportunity to review current provisions across all Health and Social Services Boards, address any inequalities in the provision of these services and provide a clear way forward to improve the lives of these children and provide a clear and equitable, service throughout the province. The report was completed in March 07, with the launch planned for June 07. The report will be used to develop a specific service framework for children with complex physical healthcare (PHC) needs.

## **Bamford Review of Mental Health and Learning Disability - [Human Rights and Equality Report](#)**

6.7. The Review's Human Rights and Equality Group published a report in October 2006 which identifies and discusses issues against domestic and international standards in Human Rights and Equality. In doing so it aims to remove barriers to the exercise of these rights: to help remove stigma and prejudice; to ensure that accessible information is provided, and shared, enabling access to services; to acknowledge the importance of the recommendations for carers and users of services, and to give protections where necessary. It sets out a number of recommendations for action (see Executive Summary). The report findings and recommendations were extensively informed by and benefited from the views of services users, their carers and their families.

## **Section 7: Information Provision, Access to Information and Services**

- **Detail any initiatives/steps taken during the year to improve access to services including provision of information in accessible formats.**

## **Website**

- 7.1. The Department's website is a key source of information for the public.
- 7.2. Health protection and promotion information leaflets covering a wide range of topics are available on the public health pages of the Department's website, several of which have been translated into a number of different languages. These include:
- A diabetic [retinopathy screening programme patient information leaflet](#)
  - A leaflet about antenatal screening entitled [Protecting You and Your Baby: Your First Antenatal Visit](#) ; and
  - Information leaflets about [breast cancer and breast screening](#).

The Department continues to offer the availability of documents in languages other than English and in other formats if requested.

## **Multi-language information booklet**

- 7.3. The Department funded the translation costs associated with the production of a multi-language information booklet for migrant workers and minority ethnic communities which provides basic information on the healthcare system and how to access it. (The booklet was launched by the Minister in June 2007.)

## **Regional Interpreting Service**

- 7.4. The Department continues to provide funding for the Regional Interpreting Service which helps to improve access to Health and Social Services for members of black and minority ethnic communities in Northern Ireland who do not speak English either as a first or competent second language.

## **Equality of Access Project**

7.5. The Department provided funding to the Women's Aid Federation NI to support an Equality of Access Project which started in October 2006. It focuses on the needs of women and children from marginalised communities at risk of domestic violence. The first report covering October 2006 to April 2007 covered the research and data gathering phases which involved consultation with BME women and in particular women who have no access to public funds and are affected by domestic violence. Work is continuing and initiatives and recommendations to improve access to services are the expected outputs.

## **Rainbow Project**

7.6. The Department provided funding to Rainbow for a two-year project on sexual health/mental health promotion.

## **Traveller project**

7.7. The Department continued to provide funding to An Munia Tober, a Traveller support group in Belfast, for a health development project for Travellers.

## **Access to Nicotine Replacement Therapy**

7.8. During the year £480,000 was allocated to HSS Boards to improve smokers' access to Nicotine Replacement Therapy (NRT). The funding enabled over 200 community pharmacies throughout Northern Ireland to provide a one-stop specialist smoking cessation service, from December 2006.

## **Public Attitudes Survey**

7.9. The [public attitudes survey](#) carried out in 2006 gauged the level of satisfaction with Health and Social Services in Northern Ireland and identified those areas in which the public would like to see changes and improvements. Gauging satisfaction with access to information and services was a key feature of the survey.

## Access Targets

- 7.10. Issues of access are being addressed through a range of major HSC strategies such as Developing Better Services; the Investing for Health Strategy and the Primary Care Strategic Framework – *Caring for People Beyond Tomorrow* (which has access targets).
- 7.11. A number of targets in the 2006/07 business plan were about promoting better access to health and social care services. Actions included promoting and increasing participation in Health screening programmes, especially in those areas where uptake was noticeably low.
- 7.12. Targets continue to be set to cut waiting times for health and social care services.

## Section 8: Complaints

- **Identify the number of Section 75 related complaints:**
  - **received by the authority;**
  - **resolved by the authority (including how this achieved);**
  - **which were not resolved to the satisfaction of the complainant;**
  - **which were referred to the Equality Commission.**

8.1. The Department received no section 75 complaints during the year.

## Section 9: Consultation and Engagement

- **Provide details of the measures taken to enhance the level of engagement with individuals and representative groups during the year.**
- 9.1 The Department recognises that effective service user and public involvement is central to the accessibility of safe, high quality health and social care services. The Department is finalising new guidance for Health and Social Care organisations to strengthen and improve service user and public involvement in the planning, commissioning, delivery and evaluation of services as part of their clinical and social care governance arrangements. It has been developed in collaboration with service users, carers, local communities and

service providers and is expected to issue in the autumn of 2007. In addition, there is a proposed new statutory duty of public involvement and consultation in the draft Health and Social Services (Reform) (Northern Ireland) Order 2007 (the draft Reform Order).

- 9.2 The Department supported the publication of a [Community Development Framework](#) which provides a Management Board level performance management system to ensure that community development approaches are mainstreamed within Health and Social Care organisations and other statutory bodies. It enables Management Boards to measure their progress in terms of initiating, developing and sustaining community development approaches, across all areas of responsibility.

### **Examples**

- 9.3 The following are some examples of where measures were taken to enhance the level of engagement.

### **New Complaints Procedures**

- 9.4 Consultation on new complaints procedures for Health and Social Care was extended by 4 weeks to facilitate responses. Pre-consultation included engagement with the Department's Equality & Human Rights Steering Group (E&HRSG), Health and Social Services Councils and a Regional Complaints Review Group which included s75 user group representation. In addition to extensive distribution & advertising of the consultation, s75 groups were targeted through the Equality and Human Rights Steering Group.
- 9.5 HSS Councils also facilitated the consultation process by engaging with s75, community & voluntary groups across NI. The Department offered a wide variety of forums to encourage participation and engage with a range of individuals/ groups during the consultation process. The consultation document was available in various formats e.g. Braille, large print, audio tape & translation into ethnic minority languages were available. Textphone was made available and interpreting and signing were offered at various events during the consultation exercise.

- 9.6 The new complaints procedures themselves will seek to give a stronger voice to those who use health and social services in Northern Ireland. They will increase the number of complaints that are resolved locally, improve advocacy for those who need support, ensure that staff learn from complaints and improve services as a result.

### **Strategy and action plan to promote equality, good relations and human rights.**

- 9.7 Consultation was carried out on a draft strategy and action plan to promote equality, good relations and human rights. A few weeks into the consultation a number of key stakeholder organisations were contacted by telephone with offers of assistance in order to facilitate responses. Some organisations asked for meetings while other asked for more time to respond. We offered the option of meetings and more time for responding which were taken up by several organisations. The follow-up telephone calls were well received and is an approach that the Equality Unit is advocating to policy leads when asked for advice and guidance.
- 9.8 Three consultation events were organised in collaboration with Strabane and District Community Network, the Fermanagh Community Network and the South Armagh Rural Women's Network. The events were attended by people representing a wide range of organisations and interests, including community transport organisations, children's and young peoples groups, women's organisations, disability groups and local councillors and MPs.

### **Dual Purpose Consultation Event**

- 9.9 As the consultation periods for the new complaints procedures and the equality, good relations and human rights strategy and action plan overlapped, it was decided to cover both of these areas at the event with the Rural Women's Network. This was a unique approach which attracted positive feedback from all parties involved.

## **Complementary and Alternative Medicine**

**9.10** The Complementary and Alternative Medicine pilot project was set up following meetings with many community groups in Belfast and Londonderry. Information was collected about the services which provided by community groups and how the proposed new service could provide additional support. When the pilot services were established in Belfast representatives of the new service gave talks at community centres and met with many organisations that represent people who traditionally find it hard to access health services.

## **Children with Complex Needs report**

**9.11** The Children with Complex Needs report was completed by March 07, with the launch planned for June 07. The report will be used to develop a specific service framework for children with complex physical healthcare (PHC) needs. There was an extensive consultative process with this project in which information was gathered from 30 parents, nearly 200 frontline professionals and 30 service managers, showing the opinions of a wide cross section of society. Parents had face to face discussions and were given the option to feedback using telephone or email media. One of the key recommendations of the report is that parents are the people who know their child best (not the professional) and that they should be consulted at all levels and treated as equals in the care of their child. This will increase user involvement and user satisfaction in the services provided.

## **Regional Equality Liaison Panel**

**9.12** The Regional Equality Liaison Panel (RELP) continues to meet and brings together Department officials and key s75 umbrella groups (NICEM, Age Sector Reference Group, the Men's Project, and Women's Resource & Development Agency etc.). The overall aim of the RELP is to act as an external reference group for the Department and its associated health, social services and public safety bodies on the implementation of their equality obligations.

## **Section 10: The Good Relations Duty**

- **Provide details of additional steps taken to implement or progress the good relations duty during the year. Please indicate any findings or expected outcomes from this work.**

10.1. The Department is actively committed to promoting a culture of diversity and good relations in all aspects of its business and to this end has taken the steps outlined below.

### **Good Relations Working Group**

10.2. In recognition of the need to do more to promote good relations, a working group, made up of members of the DHSSPS Equality and Human Rights Steering group, was established in February 2007. Its purpose is to identify opportunities for the DHSSPS family of organisations to promote good relations between persons of different racial group, religious belief and political opinion in keeping with Section 75 (2). The group has met twice with representatives of the Community Relations Council attending one of the meetings and decided to initially focus on the area of employment and on embracing religious diversity. The outcomes from the group are expected to be the development of a region-wide statement of commitment to promoting good relations, the identification of examples of good practice and a menu of options for embracing religious diversity within the Health and Social Care workforce.

### **Anti-Racism Work**

10.3. In response to growing anecdotal evidence of racist abuse experienced by overseas health workers, the Department commissioned the Institute for Conflict Research (ICR) to carry out research into the nature and extent of racist behaviours experienced by Northern Ireland's ethnic minority healthcare staff. [ICR's research report](#) was published in November 2006. The findings of this research are being factored into an action plan which is being developed to tackle racism within Health and Social Care. A key stakeholder workshop entitled "Working against Racism – Embracing Diversity in the HPSS" was held in January 2007 to inform the action plan.

## **Racial Equality in Health – A Good Practice Guide**

10.4. Work started towards the end of the reporting year on producing a second edition of the 2003 good practice guide entitled “Racial Equality in Health and Social Care”, which was published jointly by the Department and the Equality Commission. The aim is to help ensure that the services provided by the Health and Social Care family meet the needs of all sections of our community including people from black and minority ethnic and Traveller backgrounds.

## **Racial Equality Strategy**

10.5. The Department has also contributed to the development and implementation of the Racial Equality Strategy and Action Plan published in 2006 by OFMDFM.

## **Strategy and Action Plan to Promote Equality, Good Relations and Human Rights**

10.6. Promoting good relations is a key strand of the draft Strategy and Action Plan to Promote Equality, Good Relations and Human Rights. The strategy sets out actions above and beyond complying with the statutory duties with a clear focus on promoting good relations. Developing culturally competent services and training our staff so that they are fully equipped to promote equality and good relations will be priority areas for the strategy.

## **Protecting Dignity at Work: Policy & Complaints Procedures**

10.7. The Department is fully committed to promoting a good and harmonious working environment where each individual is treated with respect and dignity. Supporting this commitment is an existing policy aimed to protect the dignity of those who work for the Department or who interact with its staff, to provide guidance on the resolution of any problems should they occur and to prevent recurrence by working towards a good and harmonious working environment and atmosphere in which all workers are encouraged to apply their diverse talents and in which no worker feels under threat or intimidated.

## **A Shared Future**

10.8. The Department's has contributed to the first Triennial Action Plan (2006) for *A Shared Future* - a policy and strategic framework for good relations in Northern Ireland.

### **Section 11: Additional Comments**

- **Please provide any additional information/comments**

11.1. The senior management team within the Department places a high value on equality and good relations and is committed to the delivery of a quality health and social care service that is fair and accessible to everyone. The contribution that Section 75 of the Northern Ireland Act 1998 makes to providing such a service is widely recognised and supported within the Department and across Health and Social Care family of organisations.

11.2. Promoting fair access to services and addressing health inequalities will continue to be high priorities for the Department, with the aim of achieving better health outcomes for all citizens.