



Western Health
and Social Care Trust

Equality Screening Report

1 April 2017 – 30 June 2017

This document can be made available
in alternative formats on request

Introduction

The Western Health and Social Care Trust (WHSCT) must consider by law, Section 75 of the Northern Ireland Act 1998, how we promote equality and remove discrimination for people who use our services and for members of staff. Our obligations are set out in our Equality Scheme. The 9 groups that are specified in the Equality Scheme are:

Black and Minority Ethnic People	Different Marital Status e.g. Single, Married, Divorced, Civil Partnership, Widowed	Disabled People
Carers	Different Political Opinions	Men and Women
Different Ages - Young People/Older People	Different Religious Beliefs	People who are Lesbian, Gay or Bisexual

We also have to consider how we can promote good relations between people with different religious beliefs, political opinions or racial group (including people from the Travelling Community).

Within the Equality Scheme, the Trust gives a commitment to apply equality screening processes to all new and revised policies/proposals and, where necessary, to subject new policies/proposals to a full equality impact assessment. This process helps us to:

- assess the impact/consequences of our decisions on the people within the 9 equality groups;
- consider how we might better meet their needs (promote equality of opportunity);
- reduce any negative impacts/consequences (mitigating actions).

The Trust is required to have evidence that the following questions have been considered in relation to all policy development, strategic planning and general decision making:

- What is the likely impact on equality of opportunity for those affected by this policy/proposal, for each of the Section 75 categories? (minor/major/none)
- Are there opportunities to better promote equality of opportunity for people within the Section 75 categories?
- To what extent is the policy/proposal likely to impact on good relations, between people of a different religious belief, political opinion or racial group? (minor/major/none)

- Are there opportunities to better promote good relations between people of a different religious belief, political opinion or racial group?

(From 'Section 75 of the NI Act: A Guide for Public Authorities': ECNI).

The Trust's Equality Screening process provides this evidence.

If it is decided that a policy/proposal is likely to have major issues relating to equality, it is then necessary to consider carrying out a more detailed exercise called a full Equality Impact Assessment (EQIA).

Equality screening for all the policies/initiatives detailed has highlighted the need to ensure that information relating to them/the service is made available, throughout, to support those service users/families/carers who do not have English as a first language, including the use of foreign language interpreters and written translations etc., in line with Trust guidelines. In addition, service users, their families, carers or staff who require additional communication support including e.g. provision of information in Braille, sign language interpreters, large font or audio, will be provided with this.

Should you wish to obtain a copy of any of the policies and/or screening forms referred to in this document, or require them in an alternative format, please contact:

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Western Health and Social Care Trust: Screening Outcomes for the Period 1 April 2017 – 30 June 2017

Women and Childrens Directorate			
Title of Policy and Description	Outcome of Equality Screening	Reason for Outcome	Date Compld
<p>Reform and Modernisation of Western Trust Dental Clinics (Northern Sector)</p> <p>The Trust proposes to streamline the provision of dental services in the northern sector of the Western Trust to allow better use of resources and ensure they are used more effectively and efficiently. At present Community Dental services are provided on eight sites within the northern sector including clinics Health Centres (HC): Waterside, Great James Street, Shantallow, Strabane, Limavady, Dungiven, Castlederg, and Waterside Hospital. Many of these operate on a part time basis and because of the large number of clinics staff involved are required to travel to a number of clinics throughout the week. This presents issues for staff as they are responsible for organising clinics in a number of areas while providing care in other clinics. Apart from travel costs there are also costs associated with the maintenance of equipment in all the clinics and keeping all stock used for treatment purposes in date. Many of the materials can be costly and are not always fully used because the clinic only operates on a part time basis. Over the years staff working in the clinics highlighted these concerns to senior staff.</p> <p>Recent servicing of equipment in the Trust has highlighted issues with equipment in several localities. Two of the main clinics affected were those in Shantallow HC and Dungiven HC. The equipment in both these clinics has been in use</p>	<p>Green: No Impact: A full EQIA is not recommended.</p>	<p>It is anticipated that the service reform will contribute to improved efficiency and effectiveness of the Community Dental Service in the northern sector whilst maintaining high quality care for service users. This will be achieved by :</p> <ol style="list-style-type: none"> 1. Ensuring that service users are treated in surroundings with equipment which is safe and of a high quality 2. Increased capacity due to the removal of travel time for dental staff who currently move between clinics. There will be improved flexibility in giving routine appointments and easier to accommodate emergency appointments as the clinics will be manned more of the time. This will also contribute to more efficient management of stock within clinics to avoid waste. 3. Service users in nursing and residential homes and those requiring domiciliary care will be unaffected by the changes. Similarly those who require disability access will continue to be seen as before 4. Dentists will benefit from working within a team which will enable improved support for team members especially in the management of challenging cases. 	<p>11/4/17</p>

for many years and the Trust has been advised that parts are no longer available for repairs. It would cost approximately £52,000 to upgrade the equipment.

There has been staffing issues over the last two years in Shantallow HC due to issues with both Dentist and dental care professional cover. To maintain services a Dentist based in Limavady provided cover in Shantallow on alternate Monday's and on three of the four Fridays each month. Patients who require care from the Dental Therapist were offered appointments at other clinics in the area. These posts have now been vacated. Currently the only staff member based in Shantallow HC is one part time Dental Nurse.

In Dungiven the dental clinic runs 1 day per week in Dungiven HC and there is also a clinic held one day per month which is staffed by a Dental Therapist. There are no staff based in Dungiven, both the Dentist and Dental Nurse travel from Limavady HC to provide the service. All referrals to Dungiven are triaged through Limavady HC.

In both these facilities the Dentist works alongside a Dental Nurse and as such does not benefit from the support of other Dentists. The Dentists have highlighted that it would be of benefit for them to work alongside their peers to allow discussion of difficult cases and support for management of these patients. From a governance perspective it is not recommended that clinicians work as sole practitioners.

The Senior Dental Management group discussed the current issues within the Northern Sector and agreed there was a need to streamline the service to address some of

The majority of patients who attend the service are referred by general dental practitioners. The service change will be communicated to dental practitioners via letter to individual practices. Communication to other health professionals will be via Trust communications. Long term patients of the service will be informed by letter and will be offered a choice of venue for follow up appointments.

these issues.

It is proposed that there should be a reduction in the number of community dental clinics operating within the northern sector. In light of the issues with the two clinics identified it is proposed that the Trust should amalgamate these clinics with existing clinics to improve efficiency and address staffing challenges. It is proposed to amalgamate the dental clinic Shantallow HC with Great James Street HC and the dental clinic Dungiven HC with Limavady HC.

Patients currently treated in Dungiven will be seen by the same staff in Limavady HC, ensuring continuity of care. The Dentist in Limavady also undertakes the clinic in Waterside HC, patients can be accommodated there if they prefer.

The Trust will seek the views of potential service users via questionnaire and will also meet with staff to get their views. The paper will be considered at the Health Care Head of Service meetings, at the Women & Children's Senior Management Team and at the staff side consultation group. The Senior Dental Management Team in conjunction with Human Resources (HR) will make the final decision on the implementation of the proposal.