



Western Health
and Social Care Trust

Equality Screening Report

1 April 2018 – 30 June 2018

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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Tyrone & Fermanagh Hospital
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Western Health and Social Care Trust: Screening Outcomes for the Period 1 April 2018 – 30 June 2018

Adult Mental Health & Disability Directorate			
Title of Policy and Description	Outcome of Equality Screening	Reason for Outcome	Date Compld
<p>Managing Cancelled Appointments within the Adult Psychological Therapy Service (APTS)</p> <p>This guideline outlines strategies for the management of Cancelled Appointments (CNAs) within the Adult Mental Health Adult Psychological Therapy Service of the Trust.</p> <p>The current process of allocating and scheduling patient appointments using the Integrated Elective Access Protocols 2008 (IEAP) will continue. Patients will receive a letter from Partial Booking to contact APTS to organise an appointment that, as far as is possible, suits the patient. The patient will then receive a letter confirming the appointment details. IEAP clearly outlines processes for managing Did Not Attend (DNA) appointments.. It is proposed these guidelines will support therapists to manage cancelled appointments in a more rigorous and consistent way.</p> <p>The introduction of this guideline is in response to increased demand on the WHSCT APTS, approx. 29.5% increased referrals over 5 year period. Another driver for this guideline is the potential to increase service capacity by improved management of CNAs. For example, between April 2016 and end of March 2017 there were 1854 cancelled appointments within APTS across the Trust. This figure does not include DNAs. This represents a significant loss of clinical time and capacity within the service.</p>	<p>Green: No Impact: A full EQIA is not recommended.</p>	<p>It is anticipated that the introduction of this guideline will have a positive impact across the WHSCT and for its resident population, by ensuring a reduction in cancelled appointments and more timely access to services.</p> <p>The Trust will ensure effective management of resources in relation to available appointments and deployment of the appropriate staff to deliver these services, the reduction in CNA's will ensure that the Trust delivers on its core business targets, decreases waiting times, improving the patient's experience whilst providing a high quality, effective, accessible, sustainable and safe service to our patients.</p> <p>This guideline will be disseminated to staff through clinical team meetings and clinical supervision.</p>	<p>1/6/18</p>

Human Resources Directorate			
Title of Policy/Initiative and Description	Outcome of Equality Screening	Reason for Outcome	Date Compld
<p>Establish a Peripatetic Social Worker Team</p> <p>The Trust proposes to offer 75 permanent peripatetic Social Worker Band 5/6 contracts within Family and Child Care. All posts will be offered from the current Social Worker Band 5/6 Waiting List for Looked After Children, Family Intervention, 16+ Pathway, and Gateway.</p> <p>The purpose of establishing the peripatetic team is to provide temporary cover to the specified teams throughout the Trust area. Successful candidates will be offered a permanent contract to cover either the Northern Sector (Londonderry, Limavady and partly Strabane) or the Southern Sector (Omagh, Enniskillen and partly Strabane) of the Trust.</p> <p>Candidates appointed to the Team will cover temporary vacancies in their specified sector only, whilst holding a permanent contract, and may be asked to go anywhere within either the Northern Sector or Southern Sector of the Trust.</p> <p>Staff with a peripatetic contract will remain a peripatetic Social Worker until they are allocated to a substantive (static) position within the agreed areas. At this point, they will come off the Peripatetic Team. If a permanent position becomes available in the area that the peripatetic Social Worker is currently covering a temporary vacancy, this is the position that they would be confirmed into permanently. If there are no peripatetic Social Workers in the area where</p>	<p>Green: No Impact: A full EQIA is not recommended.</p>	<p>The introduction of a Peripatetic Team of Social Workers Band 5/6 within Family and Child Care will have benefits, both for the service and staff, it will:</p> <ul style="list-style-type: none"> • assist the Trust in meeting its statutory obligations under the Fixed Term Workers Regulations by enabling staff who have been employed by the Trust for four years or more to be given a peripatetic contract; • enable a more responsive approach to the needs of the service; • ensure the Family and Child Care sub-Directorate can deploy its staff in a safe and effective manner; • reduce the need for agency workers and temporary staff which will minimise service disruption; • enable peripatetic Social Workers to develop their skills in a wide range of areas. <p>The proposed positions will be filled in the first instance by addressing any outstanding statutory obligations under the Fixed Term Workers Regulations for Social Workers within the sub-Directorate. The remainder of the positions will be filled from the current relevant waiting list.</p> <p>An information leaflet has been produced which is available as part of the Applicant Information Pack.</p>	<p>12/6/18</p>

<p>the permanent position has become available, the position will be offered to the person who has been on the Peripatetic Team the longest. If the Peripatetic Social Worker does not wish to move into this permanent position, they can refuse and would remain covering the temporary position until they accept a substantive position.</p>		<p>This is available to candidates and can be downloaded when applying for the Social Worker Band 5/6 Waiting List for the relevant areas.</p> <p>A Nursing Peripatetic Team has been in place in the Western Trust since October 2012 and has been proven to be successful.</p>	
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Performance & Service Improvement Directorate			
Title of Policy and Description	Outcome of Equality Screening	Reason for Outcome	Date Compld
<p>Altnagelvin Hospital Wayfinding Strategy</p> <p>This strategy relates to the Wayfinding system that will be implemented and used by the Trust and applies to all Trust staff and visitors. The overall principles described in this strategy can be applied to the operation of the Wayfinding system across all premises operated by the Trust</p> <p>The term “wayfinding” describes the processes people go through to find their way around an environment. Many factors affect how people orientate themselves and find their way, but wayfinding decisions are particularly influenced by the availability of information and its ease of understanding and interpretation.</p> <p>During 2017, the Trust undertook an extensive service user and staff survey to identify key issues with the current wayfinding and signage systems in place across Altnagelvin Hospital site. The development of this wayfinding strategy is in response to the key issue raised in survey responses regarding the need for clarity and</p>	<p>Green: No Impact: A full EQIA is not recommended.</p>	<p>The implementation of this strategy will improve the patient experience by ensuring that signage and wayfinding information provided to patients and service users is accessible in terms of format, location and meets the needs of various vulnerable groups following advice from RNIB, Dementia awareness and Age Friendly. By ensuring that signage is clear and accessible as well as patient information containing appropriate wayfinding guidance, this should reduce the level of anxiety or distress felt by patients and service users ahead of any Altnagelvin Hospital site visit.</p> <p>No issues were identified in relation to promoting equality of opportunity in the policy/proposal.</p> <p>Information relating to the changes will be communicated to Trust staff via Trust Communication and to service users via the Trusts’ social media and public website.</p>	<p>9/4/18</p>

<p>consistency across the hospital site from pre-hospital information that is sent to service users ahead of their site visit to leaving facilities following their site visit. This strategy sets out key principles that underpin the Wayfinding system and identify how the system will be operated, maintained and updated including the use of temporary signage. This was as a result of issues raised by staff and service users through the Trusts' Patient and Client Experience Group.</p>			
<p>Improving Chart Accessibility within Medical Records, Altnagelvin</p> <p>This business case for funding for this project is based on the need to support improvements in terms of reducing clinical risks associated with the unavailability of patient charts at the point of care. It also supports improved storage and performance alongside reducing health and safety risks and significantly reduces Information Governance risks through improved patient chart accessibility within the Medical Records Library on the Altnagelvin hospital site.</p> <p>The library was built in 2008-2009 to support an estimated volume of 440,000 records. However, there are approximately 617,000 active patient records currently situated within the Medical Records Library, Altnagelvin and other storage areas, which are necessary to enable nursing, clinical and other professional staff to provide safe and efficient care to patients and clients within Altnagelvin Hospital Site. This causes significant logistical and operational issues with the number of charts growing year on year. The current Medical Records Library given its' size, is unable to cope with the continuing growth in the</p>	<p>Amber: Minor equality issues/ impact. A full EQIA is not recommended.</p>	<p>It is envisaged that improving chart accessibility through the proposed implementation of RFID technology within the Medical Records library, Altnagelvin will have a positive impact across the WHSCT as it will enable the effective use of resources and greater accessibility of patient records that will benefit the WHSCT population as there will be a reduction in the number of charts that are recorded as missing/unavailable for inpatients/outpatient appointments alongside inpatient/daycase appointments.</p> <p>The number of staff within the Medical Records library will be reduced through natural wastage by not replacing posts once they become vacant following the implementation of RFID technology in order to improve chart accessibility.</p> <p>By improving chart accessibility within the medical records library, Altnagelvin, this will improve the charts that are available at inpatient, outpatient and daycase appointments throughout the hospital and ensure that all patients are seen by nursing/clinical staff at their appointed time and so improve the</p>	<p>9/4/18</p>

quantity of patient charts that require storage.

The current state in the medical records library is not conducive to an effective records management process and results in the Trust being unable to comply with relevant statutory legislation. This has led to an increase in the number of charts being misfiled within the library and an increase in the number of patient charts that are unavailable at the point of care which potentially compromises patient safety and quality.

Implementation of a RFID (Radio Frequency Identification Device) Solution offers enhanced patient safety through more detailed and accurate tracking of patient charts and improved processes and layout of medical records to optimise workflow efficiency. The project objectives are to:

- Reduce risks to staff and improve compliance with health and safety issues.
- Comply with Information Governance requirements in terms of Good Management, Good Records (GMGR) and other statutory requirements relating to accessible records storage and efficient records management
- Reduce clinical quality and safety issues
- Improve layout and flow of patient records
- Support Trust in taking forward E-Health Regional Strategy
- Reduce staffing complement within Medical Records, once the technology is implemented, through efficiencies and increased productivity through natural wastage within the library.

patient experience by avoiding any unnecessary delays or cancellations for patients.

Some issues were identified and actions to reduce any adverse impact and/or to promote equality of opportunity have been identified and included in the policy/proposal. Human Resources will be involved throughout the process.

Information relating to the changes will be communicated to Trust staff via Trust Communication and to medical records staff via team meetings.

Primary Care & Older People's Services Directorate			
Title of Policy and Description	Outcome of Equality Screening	Reason for Outcome	Date Compld
<p>Transfer of Enniskillen Rapid Response Nursing Team from South West Acute Hospital, Enniskillen to Erne Health Centre, Enniskillen.</p> <p>The Rapid Response Nursing Team is currently based at the South West Acute Hospital, Enniskillen. The service provides intravenous therapies and blood transfusions to patients in the Community.</p> <p>As part of the regional Primary Care Infrastructure project it was agreed to refurbish the first floor of the Erne Health Centre and develop it as a primary and community care Hub for the population of Enniskillen and surrounding areas. At this time it was agreed by all stakeholders including GPs, the Health and Social Care Board (HSCB) and the Western Health and Social Care Trust (WHSCT) that the Health Centre would include a Clinical Intervention Centre to deliver intravenous therapies to the population of Co Fermanagh.</p> <p>This proposal relates to the transfer of the Rapid Response Team from the South West Acute Hospital to new refurbished 1st floor development in Erne Health Centre. It is envisaged that staff will relocate during May 2018.</p> <p>Patients are assessed to determine suitability for care at home or where available, care at their local Clinical Intervention Centre. The Clinical Intervention Centres currently are available in Omagh Hospital and Primary Care Complex and in Gransha Park, Londonderry. The</p>	<p>Green: No Impact: A full EQIA is not recommended.</p>	<p>It is anticipated that this service development will have a positive impact on patients who will be able to avail of intravenous treatment in a purpose built Clinical Intervention Centre in the Community. For some patients this may be an alternative service to admission to hospital or may reduce an individual's length of stay in hospital. The development of the Clinical Intervention Centre will allow up to 6 individuals to be treated at any one time thus increasing the capacity of the service to treat more patients. It will allow a range of disciplines to work together including District Nurses, Social Workers and Health Visitors to work alongside their GP colleagues improving communication and providing jointed up care.</p> <p>It provides staff with excellent accommodation and access to space that they currently do not have in the South West Acute Hospital, for example designated Staff rest area, break out space, additional storage and a purpose built Clinical Intervention Centre.</p> <p>The Erne Health & Care Centre is located close to the centre of Enniskillen town and will provide improved transport links for service users attending for treatment. There is direct parking outside the Erne Health Centre and designated disabled parking for set down at the entrance which is not available at SWAH.</p>	<p>9/4/18</p>

service operates from 8am to 12 midnight, 7 days per week.

A very small number of service users attend the current clinical area in SWAH for treatment. In the future these patients and others will be offered more regular opportunities to attend a purpose built Clinical Intervention Centre in the Erne Health & Care Centre.

Objectives of Proposal:

- To co-locate GPs and other services that currently exist within the community and bring them together into an integrated service model
- To meet the strategic direction outlined in Health & Wellbeing 2026: Delivering Together.
- To provide the population of Fermanagh with access to a Clinical Intervention Centre.
- To provide opportunities to deliver additional services that are currently delivered in hospital but could more usefully and efficiently be provided in the community, improving accessibility to patients.
- To improve primary care infrastructure and provide staff with excellent accommodation and access to breakout rooms, meeting rooms and a designated staff rest area.

The relocation of the service will be communicated to the following:

Service Users

- Any service user currently attending SWAH for treatment and required to transfer to the Erne Health Centre will be advised by the Nurse giving their treatment of the new location. The nurse will also give the service user an appointment letter with the appointment date and new location.
- All appointment letters will have new location, address and telephone number for the Service.

All Trust Staff

Date for transfer of staff and services to Erne Health Centre will be displayed on Trust intranet site.

GPs

The GP Practices located in Erne Health Centre have been a key stakeholder in this development. The Trust will use the GP forum and the Erne Health Centre GPs to communicate with other GPs in the Fermanagh area.

Women & Children's Services Directorate			
Title of Policy and Description	Outcome of Equality Screening	Reason for Outcome	Date Compld
<p>Review of Looked After Childrens Residential Care</p> <ul style="list-style-type: none"> • Relocating 84 Chapel Road, Waterside, Derry ~ Londonderry BT47 2GB Childrens Home to 106 Irish Street, Waterside, Derry ~ Londonderry BT47 2ND (currently the Cottage Children's Home) • Reforming resources to introduce the 'No Wrong Door' model to enhance Front Line Family Support Services • Standardising all Western Trust Childrens Homes to 6 bedded units. <p>This proposal will aim to standardise all Childrens Homes to six bedded units in line with the current recommendations set out by the ongoing Looked After Childrens Residential Review (2014, updated in 2016). Having six placements available in each Western Trust Residential Childrens Homes with the same staffing levels in each will provide more individually focused support for the young people who reside in the Homes.</p> <p>This proposal will be achieved through the relocation of both staff and young people from 84 Chapel Road Childrens Home to The Cottage, 106 Irish Street, which is less than a mile away. The move of the young people and the staff from 84 Chapel Road Childrens Home, who are ultimately their carers, together to 106 Irish Street provides consistency of care and practice to the young people concerned. This move is less than a mile apart with minimal impact to service users, families and staff. The relocation will allow for increased capacity of places</p>	<p>Amber: Minor equality issues/ impact. A full EQIA is not recommended.</p>	<p>It has become evident over time that young people who come into care have more complex needs and that the numbers coming into care are increasing as parents are feeling overwhelmed by the needs of young people. We must ensure as a Trust we are doing all we can to support children, young people and families. This proposal is primarily concerned with ensuring that the Directorate have the right staff in the appropriate facilities in order to promote the best possible outcomes for children and young people in line with the Trusts Corporate Parenting and Childrens Safeguarding responsibilities.</p> <p>The Directorate would wish to ensure that its skilled social workers are in the right teams providing services to those most vulnerable children, young people and families so that we can maintain these children and young people within their families of origin.</p> <p>The proposal will also examine how the Trust delivers on its Corporate Parenting and Safeguarding responsibilities to ensure that we are delivering on our delegated statutory function. This proposal will benefit families who are feeling overwhelmed and require intervention around relationships to prevent children entering the care system.</p> <p>It is anticipated that the new model will support front</p>	<p>27/6/18</p>

<p>available and provide a further opportunity for the Trust to develop a 'No Wrong Door' model to be delivered from the 84 Chapel Road facility.</p> <p>The 'No Wrong Door' model is an initiative which was developed in North Yorkshire as part of the Children's Social Care Innovation Programme and Research in Practice Partners North Yorkshire County Council. The initiative focuses on young people on the edge of care and their families who are given access to round-the-clock support to resolve issues that can lead to adolescents going into care.</p> <p>The model will provide a platform for a more effective and integrated service. It is anticipated this model will have a positive impact through greater flexibility of service model and will increase the level of therapeutic interventions and enhance access to services for children, young people, families and carers. All training needs and redeployment issues will be addressed in line with HR policy and consultation throughout this process.</p> <p>The 'No Wrong Door' model in North Yorkshire has been independently evaluated and the Department for Education (DFE) perceive it as an innovative model that could be rolled out across England to promote family support and reduce admissions to care.</p>		<p>line staff to reduce admissions to care and provide greater levels of family support to the most in need.</p> <p>The changes to the service will be communicated via consultations with the Trust's management team who will work with staff and Trade Unions to introduce the proposal detailed in this document, ensuring that those staff directly affected by the change are kept fully informed of all aspects of the implementation on a timely basis. Social Work staff will meet each young person using the service and families individually and communicate with them what the proposal means for them. Parents/Carers have been continuously informed via Looked After Children (LAC) reviews that there could be changes to service provision if demands for the service change.</p>	
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