

## **Western Health and Social Care Trust**



### **Public Authority Statutory Equality and Good Relations Duties Annual Progress Report 2020-2021**

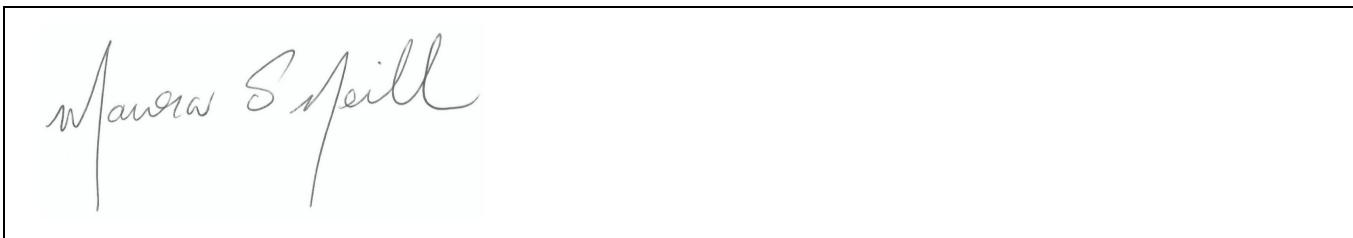
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Documents published relating to our Equality Scheme can be found at:

<http://www.westerntrust.hscni.net/1596.htm>

#### **Signature:**



**This report has been prepared using a template circulated by the Equality Commission.**

**It presents our progress in fulfilling our statutory equality and good relations duties, and implementing Equality Scheme commitments and Disability Action Plans.**

**This report reflects progress made between April 2020 and March 2021.**

## **Introduction**

This is the Trust's 14th Annual Progress Report on Section 75 of the Northern Ireland Act 1998 and Section 49A of the Disability Discrimination Order (DDO) for submission to the Equality Commission of Northern Ireland. In preparing this Annual Progress Report the Trust has used the template provided by the Equality Commission for Northern Ireland (ECNI). The Report provides assurance to Trust Board on how the Trust has fulfilled its legislative obligations and gone beyond compliance to achieve best practice in promoting equality of opportunity and good relations.

This report will reflect that the Trusts 'normal business' has been greatly impacted by the Covid-19 Pandemic. On 11<sup>th</sup> March 2020, the World Health Organisation officially declared Covid-19 a pandemic due to the speed and scale of transmission of the virus. As a result the Trust concentrated on delivery of essential services only in order to maximize the number of staff and resources available to respond to emerging needs/demands, safeguard lives and prevent the HSC system from becoming overwhelmed. The Trust has now started the process of rebuilding services in an incremental way while ensuring the delivery of high quality and safe patient/client services.

Throughout the pandemic section 75 Equality Screenings have been completed on the Trust plans. These include:

- Covid-19 Surge Plan (March 2020)
- Rebuild Plan June 2020
- Rebuild Plan July to September 2020
- Winder Resilience and Surge Plan October 2020 to March 2021
- WHSCT Mass Vaccination Centres

The Equality Screening forms provide assurance that a full EQIA and public consultation will be carried out on any actions detailed within the plan that may be taken forward on a permanent basis.

The Trust recognises that there are a number of policy leads/decision makers across HSC who likewise must comply with the S75 Equality Duties, the Human Rights Act and the Disability Duties in the development, implementation and review of the Minister for Health's "Strategic Framework for Rebuilding HSC Services" in NI and in the development and implementation of HSC Trusts Rebuild Plans. The Trust therefore commits to collaborate, as necessary, with all relevant HSC organisations in seeking to ensure the fulfilment of these statutory duties. This may entail, in some instances, the Trust feeding upward into regional Equality Impact Assessments (EQIAs) led by other HSC Policy Leads e.g. Department of Health (DoH), HSCB et al, contributing to equality screenings by other policy leads where there are for example regional themes, undertaking further individual equality screenings on Trust proposals and where necessary and appropriate conducting EQIAs and associated consultation in line with the commitments in approved Equality Schemes and in the fulfilment of the requirement of the DoH Circular Guidance 'Change of Withdrawal of Services – Guidance on Roles and Responsibilities' – September 2019 especially where temporary changes are being proposed as permanent.

Part A of this Report provides an overview of the work undertaken in compliance with the Trust Equality Scheme obligations. It is important to note that this Report does not detail all of the work that the Trust carries out to promote equality of opportunity and good relations and to address inequalities as a key element of the Trust's business is to improve health and wellbeing and address inequalities.

A full progress update on our Equality Action Plan for 2020-2021 is appended (Appendix 1) and our Local Equality and Disability Action Plan (Appendix 3) for ease of reference and details achievements at both a regional and local level.

Appendix 2 relates to compliance with our legislative duties under Section 49A of the Disability Discrimination Act 1995 (as amended) (DDA) to promote positive attitudes towards disabled people and to encourage their full participation in public life. It provides an update on the progress of our Disability Action Plan (2018-2023) and achievement in year 3 - 2020-2021. Appendix 3 includes information on our Local Disability Action Plan.

## **Key Issues and Needs in the Western Trust Area**

### **Geography**

The Trust's catchment area extends over 4842 km<sup>2</sup> and serves a population of approximately 300,000, increasing to approximately 410,000 when the population of the Northern Health and Social Care Trust is taken into account for which the Trust provides a sub-regional service for ophthalmology, trauma and orthopaedic, urology and oral surgery. The Trust provides a wide range of health and social care services from a number of hospitals, community facilities and people's own homes across a geography which has a mix of highly urbanised and extensive rural communities. This, alongside high levels of multiple deprivation and related health inequalities in some areas of the Trust geography, creates significant challenges for service delivery for the Trust as a health and social care provider and for service users accessing services.

### **Our services\***

We deliver services to our population from:

- 7 Hospitals
- 11 health centres and clinics
- 8 children's homes
- 30 day centres
- 8 residential homes and 1 hostel
- 6 training centres
- 12 administration hubs
- As well as directly into thousands of people's homes.

Each year we handle approximately:

- 100,000 inpatient and day case admissions
- 20,000 operations
- 220,000 outpatient appointment

- 120,000 emergency department attendances
- 300,000 imaging tests
- 20,000 renal dialyses
- 4,000 births

Each year we provide support to people in our communities through approximately:

- 1,800 residential and nursing home placements
- Domiciliary care services to 4,500 people in their home
- £4.5 million annual spend on community equipment
- 245,000 Community allied health professional contacts (eg physiotherapy, occupational therapy)
- 17,000 social work contacts
- 390,000 community nursing and health visitor contacts - 7,000 mental health assessment referrals

\*Services have been impacted by Covid-19

## **Our Changing Population Needs**

- Our older population is growing with a 27% increase predicted in those aged 65-84 years and a 39% increase in the 85+ age groups by 2028.
- In contrast, the under 16 population is decreasing but there are increasing numbers of looked after children
- 1 in 4 people live in poverty.
- 5 of the top 10 most deprived areas are in the Western Trust.
- 10 of the top 20 areas with poorest access to services are in Fermanagh and Omagh.
- 60.5% of hospital admissions in the Western Trust are in the level 1 and 2 deprivation categories, i.e. most deprived, the highest proportion in Northern Ireland.

## **Deprivation**

Despite high levels of deprivation, the population of the Western Trust shows equivalent or better health outcomes than the Northern Ireland average, except for:

- Respiratory conditions, i.e. asthma and chronic obstructive pulmonary disease (COPD).
- Mental health is considerably worse than the NI average, particularly due to anxiety and depression.
- More people are likely to suffer pain and discomfort than for Northern Ireland as a whole.
- There is a higher number of children in need as a proportion of our population.

The Trust works within a diverse society and we want to improve how we support the differing needs of those people and families who receive our services and of the staff who provide these services. We are committed to meeting our roles and responsibilities in the promotion of equality of opportunity, good relations and diversity in the services we offer and within the workforce that provides these services.

Within the Trust, we will provide services and employ staff regardless of their age, dependent status, disability, gender, marital/civil partnership status, political opinion, race, religious belief

and sexual orientation. We respect diversity and believe that by knowing our public and staff better we can provide better services.

The Western Trust wants to support people on their life journey and help our staff to provide appropriate care when required. We believe that this will be achieved by working in partnership with patients, service users, carers, families, staff, communities and other agencies to co-design and co-produce our services.

We want to safeguard and support the most vulnerable in society to achieve this we work in partnership to ensure that the health and social wellbeing of our community is nurtured. It is important to see the whole person, not just treat different conditions. We want to work together to develop and expand specific pathways of care which are designed around people and their needs.

## **PART A – Section 75 of the Northern Ireland Act 1998 and Equality Scheme**

### **Section 1: Equality and good relations outcomes, impacts and good practice**

- 1 In 2020-21, please provide **examples** of key policy/service delivery developments made by the public authority in this reporting period to better promote equality of opportunity and good relations; and the outcomes and improvements achieved.

*Please relate these to the implementation of your statutory equality and good relations duties and Equality Scheme where appropriate.*

#### **Changes to Service Delivery during 2020/21 as a result of Covid-19**

As a result of the Covid-19 pandemic, the Trust had to make decisions and take actions at short notice to ensure that patient, service user and staff safety remained our priority. There has been a considerable amount of innovations and change in practice to enable COVID-19 safe working practices, including widespread use of telephone triage, virtual clinics and video calls. Building on this will involve, working closely with our primary care and community partners and our clinical and social care leaders, using flexible and remote working where appropriate and rapid scaling up of technology. We are also engaging with our frontline staff to reflect on the many “lessons learned” and further work will continue on this to inform our plans going forward. The Trust is actively involved in the regional Service Delivery Innovation work-stream, who have identified a number of key initiatives which will be mainstreamed, including virtual visiting and virtual consultations

During this reporting period there has been a considerable amount of innovations and change in practice to enable COVID-19 safe working practices, including widespread use of telephone triage, virtual clinics and video calls. Building on this will involve working closely with our primary care and community partners and our clinical and social care leaders, using flexible and remote working where appropriate and rapid scaling up of technology. We also continue to engage with our front line staff to reflect on the many “lessons learned” and further work will continue on this to inform our plans going forward. The Trust is actively involved in the regional Service Delivery Innovation work-stream who have identified a number of key initiatives which will be mainstreamed, including virtual visiting and virtual consultation.

In addition to Virtual Clinics and appointment, additional changes to services included:

- Service Users offered planned appointments during the evening and weekends to avoid unnecessary delays;
- Some outpatient appointments with clinical teams took place via telephone or by video call, as appropriate. There were limited face to face appointments and these were given to urgent and priority cases;
- To minimise the time people waited and understand any risks, service users were helped to prepare for appointments in a different way such as screening questionnaires or getting blood samples taken before arrival;
- People were given specific times to access services due to limited waiting spaces;
- Staff wearing masks and other protective covering to keep service users, visitors and themselves safe;
- Accommodation will be used in a way which helps us to maintain social distancing;
- There are many factors both local and regional that are interdependent such as transport, cleaning, catering, visiting policies, signage, car parking etc. that we will

- consider as part of rebuild plans;
- Visiting arrangements may change in line with transmission rates within the community.

The Trust built on new ways of working to continue to provide safe, effective compassionate care. This involved enhanced local system working, strong clinical leadership, flexible and remote working where appropriate and rapid scaling of technology-enabled service delivery options. We engaged with our frontline staff and users of our service to reflect on the many 'lessons learned' and further work on this will be crucial. We continue to consider feedback, complaints and intend to optimise our user and staff forums. This learning and sharing of best practice will inform our longer term operational and strategic planning as well as the wider regional priorities.

We will continually review our service delivery and work to prioritise which services and which aspects of our services that we can safely and effectively reinstate given the additional constraints the covid-19 pandemic places on us.

The increased use of virtual appointments by outpatient clinics, traditionally based on acute hospital sites, has meant that service users have had their medical conditions reviewed whilst also being kept safe as they no longer need to attend an acute site/hospital. However, the use of virtual clinics has presented challenges for service users or patients who are deaf and use sign language and for staff from the BME community. Staff are mindful of this and technological solutions are continuously being embraced locally with our IT staff and regionally to overcome these challenges. The NI HSC Interpreting Service and The Big Word provide a virtual service/telephone service, for services users whose first language is not English. Interpreter Now have been engaged by the HSCB to deliver a virtual service for non-covid appointments for service users who are British or Irish Sign Language users.

The Trust remains conscious of issues with broadband and telephone connection in some of our more rural areas and continues to liaise with clients to discuss options and ensure appointments still take place.

### **WHSCT Vaccine Programme**

A coronavirus (COVID-19) vaccine developed by Pfizer/BioNTech was approved for use in the UK on 2 December 2020. The vaccine was available in Northern Ireland from week commencing 14 December 2020. The Trust successfully undertook a drive to administer first and second doses of COVID-19 vaccine across all care homes.

In the initial phase of the vaccination programme, given the constraints of the deployability of the Pfizer-BioNTech product, the vaccine was administered mainly through vaccination centres operating under the direction and governance of Health and Social Care Trusts. Each of the Trusts identified suitable premises where vaccinators would administer the vaccine in a safe, controlled and socially distanced environment with the appropriate measures in place. This phase of the programme also started week commencing 14 December 2020.

The model for vaccine deployment was designed to be pragmatic, agile and flexible. Teams of vaccinators were trained from a range of professional backgrounds in addition to extant HSC staff and primary care staff.

In order to facilitate maximum vaccine deployment and uptake, overall the vaccination model included Trust mobile and roving teams who focussed on those groups for whom travel to a

vaccination centre would be challenging, such as the elderly and care home residents or a supported living centre where the clinical risk was considered to be similar to a care home. When these Trust mobile teams were present at a care home they also offered the vaccination to all staff as well as residents. The mobile team element of the programme also began week commencing 14 December 2020. Western Trust vaccination teams were responsible for administering vaccines to all 64 care homes located across the Trust area.

With the availability of a suitable vaccine, from early January 2021, the Trust rolled out the programme through primary care led vaccination clinics which were responsible for the vaccination of the vast majority of eligible individuals. Northern Ireland along with the other Devolved Administrations adhered to the Joint Committee on Vaccination and Immunisation (JCVI) advice on prioritisation of the vaccine as published on 2 December 2020:

<https://www.gov.uk/government/publications/priority-groups-for-coronavirus-covid-19-vaccination-advice-from-the-jcvi-2-december-2020>

The JCVI published advice on the immediate priority groups for the early phases of vaccine deployment. The JCVI specifically advises that:

*“the first priorities for any COVID-19 vaccination programme should be the prevention of COVID-19 mortality and the protection of health and social care staff and systems. Secondary priorities could include vaccination of those at increased risk of hospitalisation and at increased risk of exposure, and to maintain resilience in essential public services”*

JCVI acknowledged that the single greatest risk of mortality from COVID-19 is increasing age and that the risk increases exponentially with age. There is clear evidence that those living in care homes for older adults have been disproportionately affected by COVID-19 as they have had a high risk of exposure to infection and are at higher clinical risk of severe disease and mortality. Given the increased risk of outbreaks, morbidity and mortality in these enclosed settings, these adults were considered to be at very high risk as were care home workers who were therefore considered a very high priority for vaccination.

Frontline health and social care workers are at increased personal risk of exposure to infection with COVID-19 and of transmitting that infection to susceptible and vulnerable patients in health and social care settings. JCVI considered frontline health and social care workers who provide care to vulnerable people a high priority for vaccination. Protecting them protects the health and social care service and recognises the risks that they face in this service.

All health and social care staff in Northern Ireland were offered the COVID-19 vaccine as an early priority. In light of the planned delivery schedules of the vaccine in December 2020 and January 2021 this was phased. Ultimately all health and social care workers will have the opportunity to be vaccinated to protect themselves, their families, and patients. In considering the early deployment the aim was:

- To protect vulnerable patients and clients at higher risk of severe disease and mortality.
- To protect staff working in high risk areas for exposure, and
- To protect staff members at highest personal risk of morbidity and mortality

Whilst acknowledging the advice from JCVI on vaccine prioritisation an important additional factor for HSCNI was that of the ability to deploy the vaccine safely with minimum wastage.

With this in mind a Framework was developed to help guide the deployment of vaccination for all health and social care staff, including those in the independent care sector.

To assist with the planning of, setting up and equipping the required high capacity fixed site vaccination clinics, a clinic checklist was developed. This checklist covered 16 different criteria with specific requirements aligned to each criteria and included guidance on storage, site safety, wastage etc.

An online booking system was established and, given the geographical area that WHSCT covers, there were 3 Vaccination Centres established:

- Foyle Arena, Derry
- Omagh Leisure Centre
- Lakeland Forum, Fermanagh

It is anticipated that the clinics will run well into 2021.

### **Communication re Covid**

Timely clear information is key at a time when there are changes to service delivery and those changes are often rapid and immediate. The Trust has made full use of social media, its website, staff and user forums, local voluntary sector colleagues and statutory partners to ensure staff and service users are aware of key changes and where to go if they have queries/feedback etc.

We are committed to ensuring information is accessible and information about Covid and how the Trust is changing service delivery is available. Social media has been used to remind the public about the normal protocols and helplines if they are concerned about the welfare of a child or vulnerable person during the Covid 19 pandemic.

Measures will be kept under review in line with public health guidance and the lifespan of the pandemic. The Trust will subject the plan to on-going screening to monitor the impact of the temporary measures on a continuous basis to ensure that the impact is not more significant than initially anticipated and the frequency and urgency with which changes are required to address the demands of the pandemic.

Equality staff have worked in partnership with PHA, community groups and staff from other Trusts to dispel myths circulating among ethnic minority communities about the vaccine and to provide information in accessible formats and promote access to the vaccine.

### **Multiagency Group**

A multiagency group was commenced in April 2020 to support planning and collaborative working during the first Covid surge. The group has continued to meet to assist in communication and joint working in supporting communities during Covid. The group is attended by Western Trust, Public Health Agency (PHA), Department for Communities (DfC), Department of Agriculture, Environment and Rural Affairs (DAERA), Police Service of Northern Ireland (PSNI), Derry City and Strabane District Council (DCSDC), Causeway Coast and Glens Borough Council (CCGBC) and Fermanagh and Omagh District Council (FODC).

### **Regional screening template and toolkit**

Regional work has been carried out to develop a two part screening template that has been piloted in the Belfast Trust. The aim is to develop a user-friendly template for policy makers. There has been engagement with Equality Commission (ECNI) colleagues and suggested amendments have been incorporated and shared with the Commission for ratification. It was envisaged that this template would be adopted by the Trusts in collaboration with the Commission however discussions continue.

### **Regional Accessible Communication Group**

During 2019-2020 a Regional Accessible Communication working group was established, chaired by NHSCT. The purpose of the Group is to guide the development and implementation of an information standard in line with the Accessible Information Standard in England for the provision of appropriate communications support and personalised, accessible information to disabled people by health and social care organisations. Membership includes representatives from voluntary sector organisations working with affected groups including RNIB, Mencap and Action on Hearing Loss. In 2019-2020 the group engaged with the regional Encompass programme to discuss accessibility to information for those with a visual or hearing impairment. Due to Covid-19 work of the group has been on hold for 2020/21.

### **Accessible communication**

During the reporting period the Trust had a total of 5,397 sessions of foreign language interpreting, via both face to face and telephone. Given the Covid pandemic and the need to comply with guidance on social distancing, new ways of working e.g. virtual clinics etc. the number of face-to-face interpreting sessions provided reduced by 48% in this period. Demand for telephone interpreting increased by 79%. Trust departments also regularly ensure that information is translated into other formats.

There were 499 sessions of British and Irish Sign Language Interpreting delivered face-to-face during 2020/21. This is a 41% decrease on the interpreting provided during 2019/20. Many of the Sign Language interpreting sessions were held using the new Remote Interpreting Service. The table at Appendix 4 provides information on Sign Language uptake including figures for previous years.

As a result of the pandemic and many of our Health and Social Care (HSC) Services and essential information sources switching to telephone contact only, a Regional Remote Interpreting Service was introduced within HSC in Northern Ireland: InterpreterNow. The service was introduced to address the significant challenges and risk to deaf people and others who use sign language brought about by these changes.

The Health & Social Care Board (HSCB) commissioned the temporary Remote Interpreting Service to empower people to access and communicate with HSC Services via telephone due to the current public health guidance on social distancing and minimising risk of infection to sign language interpreters. The new service comprises two elements:

**Video Relay System:** enables Deaf people to telephone any HSC service via a remote British Sign Language (BSL) or Irish Sign Language (ISL) interpreter.

#### **How it works:**

The Deaf person contacts the interpreter via the service app, using their smartphone/ tablet or via the secure video link/app using a computer. Once they are connected, the interpreter

telephones the HSC service provider on the Deaf person's behalf.

The Deaf person, the interpreter and the HSC service provider can all be in different locations.

This service can be used to:

- communicate with a HSC professional
- organise a GP appointment
- make a booking through hospital outpatient services
- call the pharmacy, etc.

**Video Remote Interpreting:** enables Deaf people in Northern Ireland to communicate with a HSC professional in person, via an online BSL or ISL video interpreter.

**How it works:**

The Deaf person and the HSC service provider can be in the same location, while the interpreter is online via secure video link on a screen in the office (e.g. a tablet, smart phone, or computer).

This service can be used for short non-complex appointments including:

- a GP appointment
- a pharmacy consultation
- the translation of medical advice received in the post
- a visit to Emergency Department until a face to face interpreter can be booked.

In the context of the COVID-19 pandemic, the priority was to ensure immediate access to telephone services. As a result the Video Relay System was introduced first.

The remote services are accessible to the deaf community and HSC services. Deaf service users download an app to their phone/mobile device or a link to their computer which will provide them with access to an interpreter. The app/links have security and encryption. HSC services can also gain access to the interpreter by downloading an app to their phone/mobile device or a link to their computer. Information and support was provided to HSC staff to advise them of the service, how to download the app/link and how to book an interpreter. Issues with Trust Firewalls also meant a delay in staff being able to access the service initially.

The new service is provided by Sign Solutions (<https://www.signsolutions.uk.com/>) through their INTERPRETERS LIVE! service (<https://www.interpreterslive.co.uk/>).

**Good Relations**

A Joint Equality, Good Relations and Human Rights Forum has been established in partnership with ECNI, Human Right Commission (HRC) and Community Relations Council (CRC). During Good Relations Week 2020, the 6 HSC Trusts engaged online with colleagues from the CRC, ECNI, and service users and carers, as well as HSC staff and Trade Unions, local Council representatives, the Patient and Client Council, the Business Services Organisation, the Public Health Agency and representative organisations. The purpose of the engagement was to produce a consistent, clear and unequivocal statement for the HSC Sector to outline our pledge to promote Good Relations amongst everyone - our patients, service users, carers, visitors and staff.

Consensus was reached on the following statement and this has since been approved by our respective Executive Teams:



Posters of the statement will be prominently displayed throughout HSC facilities in Northern Ireland to remind everyone of this important commitment. Work to develop the Trust Good Relations Strategy will continue.

### **Ethnically Diverse Staff Network**

The Trust took proactive steps to reach out to our Ethnically Diverse staff, our former Chief Executive hosted two virtual meetings for Black, Asian and Minority Ethnic (BAME) Trust employees during week commencing 22 June 2020. The aim of the meetings was to listen to the concerns and feedback from our BAME staff on how they have felt supported as a Western Trust employee working through COVID-19. Themes from the meetings were summarised and a BAME Network, led by BAME staff and supported by Human Resources and Equality staff was formed. The group recently changed the name to WHSCT Ethnically Diverse Staff Network (EDSN) and have held a number of meetings. The group continue to actively recruit.

### **Delivering Value – Safe, Effective, Affordable Services**

The Trust's 3 year financial recovery programme "Working Together Delivering Value" (2019-2022) was inception in 2019 with a hugely successfully first year of tactical savings being delivered at 95% of a £7 Million target. The primary focus was to scope and agree a range of efficiency big programmes of work across the 3 year programme in order to help the Trust achieve financial recovery whilst continuing to deliver safe and effective care to our patients and clients.

The COVID-19 surge changed the outlook for the Trust bringing about quick and significant change opportunities. As part of the reset of services within the Trust it was agreed that there was a requirement and focus on projects that had a strong connection to safe and effective COVID-19 practices centred on the Trusts strategic priority of "Safety, Quality & Supporting Our

Staff during Covid-19".

In light of COVID-19 there was a renewed focus for Working Together Delivering Value and the Trust on harnessing the gains from new and innovative ways different teams/ services had adopted and how this could further support the Financial Recovery Programme. As a result a total of 9 Big Programmes of work were agreed; 5 existing projects and 3 new projects as follows;

1. No More Silos
2. Older Person Journey
3. Improving Quality and Safety in Adult Mental Health Services
4. Strengthening the Relationship Pathway in Family and Childcare
5. Unscheduled Care Project (ED,ACU and AMU Teams)
6. Virtual and Mobile Working
7. Working Safely Together
8. NHS Charities
9. General Surgery Pathway

A revised financial recovery plan has been submitted to the DoH requesting an extension to the Trusts Financial Recovery programme to 2023, which reflects the original plan with some new opportunities for savings.

### **Our Strategic Priorities**

Our single overarching focus over the coming years is to deliver on the quadruple aim as set out by the then Minister for Health in Health and Wellbeing 2026 – Delivering Together.

These four aims, as represented below, are key to improving the health and wellbeing of our population and achieving the Minister's ambition that we all lead long, healthy and active lives.



In support of Health and Wellbeing 2026 - Delivering Together, we have drawn up a wide-ranging and challenging programme of work to be taken forward over the next three years. This is comprised of three main strands – Transformation, Pathfinder and Financial recovery – and is expected to deliver the following outcomes:

- High quality and safe services
- Services that are financially sustainable and effective
- Delivery of contracted activity and performance targets
- Supported by a skilled and effective workforce

### **Transformation Programme**

The Transformation Programme is anchored on “Health and Wellbeing 2020: Delivering Together” and “Systems, Not Structures: Changing Health and Social Care” (the report led by Professor Rafael Bengoa). Delivering Together sets out four key ambitions for Transformation of services which are about:

- Providing people with the information and education they need to support them to keep well for longer
- Where care is required ensuring it is accessible safe and of a high quality and people are treated with dignity respect and compassion
- Empowering staff and supporting them to do what they do best
- Ensuring services are efficient and effective

Since 2018 the Department of Health (DoH) embarked upon a wide ranging programme to transform Health & Social Care (HSC) services. The four key areas of activity are:

### **Build capacity in communities and in prevention**

- Work with communities to support them to develop their strengths and use their assets to tackle the determinants of health and social wellbeing
- Reduce inequalities and ensure the next generation is healthy and well

### **Providing a greater level of support through Primary Care**

- Focus on prevention based approaches
- To enable more preventative and proactive care, and earlier detection and treatment of physical and mental health problems
- By establishing multidisciplinary teams to provide the right support, at the right time, by the right people, with the right skills
- By giving pharmacists access to the patient information they need to deliver better care

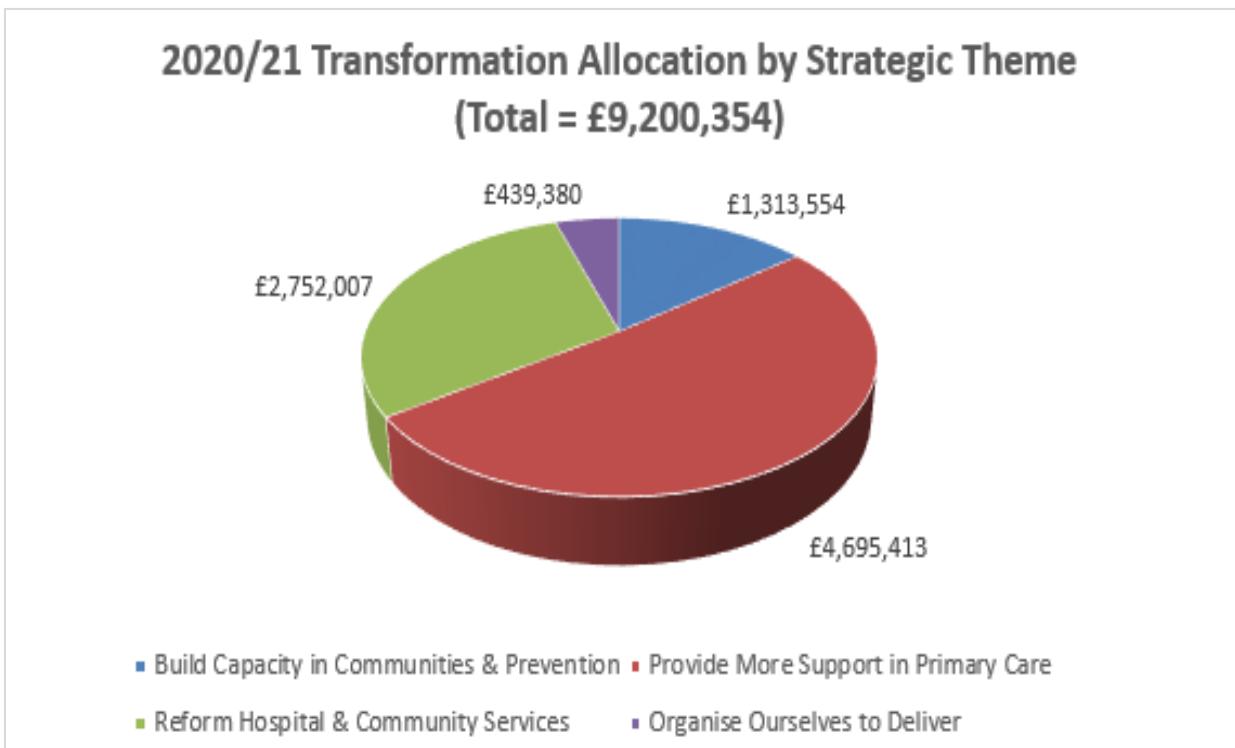
### **Reforming how community and hospital services are provided**

- Better specialist mental health services & support for carers
- So that they are organised to provide care when and where it is needed
- By delivering elective care centres, which will change how and where vital services are delivered
- Reviewing how we deliver care in diabetes, stroke and other services
- To reflect the increased emphasis on services offered in primary and community settings, and make sure hospital services remain of high quality, and sustainable for the future

### Better organisation of administrative and management arrangements

- Ensuring that the administrative and management structures make it easier for staff to look after the public, patients and clients
- By rolling out workforce and leadership strategies
- By restructuring the work of the HSC Board

In 2018/19 and 2019/20 a range of Transformation projects were funded through the Confidence and Supply agreement. During 2020/21 the Western Trust received £9.2m in project allocations through New Decade, New Approach (NDNA) funding to continue Transformation projects with financial management monitoring expenditure and slippage. This covered a range of 48 projects across the four key areas of activity as follows:



Projects funded within the Western Trust in 2020/21 included:

#### **Primary Care Multi-Disciplinary Teams**

In July 2018 the Western Trust, in collaboration with the Derry GP Federation, was selected by Department of Health (DOH) as one of 2 areas to roll out Primary Care Multi-Disciplinary Teams. Since then the Trust has been working in partnership with the Derry GP Federation to implement this new model in Primary Care across 28 GP practices stretching from Limavady to Strabane and Newtownstewart. This model provides direct access, in a Primary Care setting, to Physiotherapy, Social Work and Mental Health support to patients. Additional Health Visiting and District Nursing staff are also provided through this model.

#### **Our Hearts, Our Minds**

A unique 12-week programme designed especially for patients living with cardiovascular disease or at risk for developing same, the new programme is the first of its kind in Northern Ireland and is based on research carried out in Imperial College, London.

The Our Hearts Our Minds (OHOM) Programme for Cardiovascular Health was launched by the WHSCT in April 2019 by Mr. Richard Pengelley, Permanent Secretary for Health. As part

of the DoH's Delivering Together agenda the new programme has transformed the existing cardiac rehabilitation service in the Western Trust into a panvascular prevention service (integrating primary and secondary prevention). The programme is delivered across 3 sites – Gransha, Omagh Hospital and Primary Care Complex and the South West Acute Hospital as well as the local leisure centres. The results have demonstrated high uptake and retention rates with over 700 patients accessing the programme. Analysis of the programme outcomes has shown real evidence of healthy lifestyle change (smoking cessation, improved diet, increased physical activity) as well as the majority of patients achieving their lipid and blood pressure targets. Importantly there was significant improvement in patient reported outcomes including a reduction in anxiety and depression as well as improvements in quality of life. These measures will significantly reduce the risk of recurrent cardiovascular disease and other chronic diseases such as cancer, Type II DM and dementia.

In March 2020 some staff were redeployed initially to assist with the Trust's covid response. On return from redeployment in May 2020 no face to face clinics were permitted. OHOM began their Virtual Service, Pexip video clinics and telephone clinics, weekly education classes and weekly telephone coaching calls.

Virtual platforms were set up i.e. ICT, information Governance, agreed DPIA for Pexip etc. Staff received training on video clinics and a working from home risk assessments was completed for every member of staff. This all had a significant impact on activity of patients seen.

Due to social distancing and adhering to Covid-safe workplace policy for Western Health and Social Care Trust staff office space was reduced significantly e.g. Altnagelvin office capacity reduced from 12 to 9 staff. Staff rotated from home to office.

### **Looked After Children (LAC) projects**

Has helped reduce LAC numbers; children can remain within the Trust area, their local communities and families. A Professional Lead has tracked a cohort of children and young people to identify pathway/transition plans and check what services the cohort has access to. By focusing on their adverse childhood experiences, placements with Specialist Foster Carers, with mixed skills model of support, has transformed the lives of children and young people. Benefits of the Transformation programme to quality improvement involves linking better managed transitions and interfaces so the patient/client has an experience of a seamless service. Specific benefits include:

- Prevention of onward referrals being made to the Gateway Service through the provision of early, local based intervention and support.
- Better outcomes for stroke patients as they receive earlier intervention and support
- Support to residential and nursing homes, this has led to improved quality of care and has prevented inappropriate admissions to hospital.
- SEN for AHPs and Community Paediatrics has a single Point Entry meaning children are getting their statutory assessments in a timelier manner.
- Patients have moved from a pre-diabetic range to normal, thereby preventing or delaying the onset of diabetes.
- Improved quality of life for adults with dysphagia.
- Young vulnerable women and their extended families have built strong therapeutic relationships with family nurses.
- Patients on Haematology Consultant waiting lists have reduced waiting times as they

are now reviewed by the Clinical Nurse Specialist.

### **Western Trust Diabetes Prevention Programme**

The Diabetes Prevention Project (DPP) is part of a regional Northern Ireland Diabetes Prevention Programme funded by PHA, established in February 2019, to help delay the onset of Type 2 Diabetes Mellitus (T2DM).

DPP is aimed at individuals who have been identified as being pre diabetic by their GP or Practice Nurse and are referred to the programme via the GP Clinical Care Gateway (CCG) system. Central to the programme is education and awareness raising around nutrition, physical activity and behaviour change to encourage participants to adopt a lifestyle behaviour change in order to reduce the risk of developing T2DM.

DPP is outcome based. The key outcome is Diabetes prevention i.e. to reduce/ maintain HbA1c levels for participants by the end of each programme (HbA1c results are verified through the NIECR data system). Secondary outcomes include weight loss through the adoption of healthier behaviours using a lifestyle approach. GPs are noting significant changes and improvement to their patients and are very supportive of the DPP.

To date 1,694 individuals, throughout the Western Trust Area, have been referred on to the Diabetes Prevention Programme (DPP). Based on 102 individuals that initially took part in programmes:

- 48% are no longer pre-diabetic (48 people)
- 18% reduced their HbA1c figure (18 people)
- 28% remained at the same level and did not progress towards T2DM (29 people)
- 6% increase in range however did not cross over into T2DM (7-participants)

In summary 94% greatly increased their health outcomes and reduced their risk of developing T2DM through attending the programme (68 people). Evidence of success has also been reflected by participant's weight loss; In total 102 participants have lost 386KG = equivalent to 61 stone.

Given the programme last for 9 months it is worth noting the high retention rate of 67%. Participants have reflected on the additional improvements to their family health by them adopting a healthier lifestyle following the DPP programme.

Based on the above Outcome Based Accountability (OBA) DPP has demonstrated progress in the area of health and wellbeing by preventing the risk of the onset of T2DM.

Delaying the onset of T2DM has positive long-term effects on the financial implications for the health service. In addition, research shows that by reducing T2DM this further reduces the risk of other associated complications such as, cardiovascular disease, stroke, amputation, high cholesterol and hypertension. The DPP programme is an example of an effective OBA transformation project and supports the 'Health and Wellbeing 2026: Delivering Together agenda.

### **Pathfinder**

During 2020/21 Pathfinder continued to work in partnership with many stakeholders, building a shared consensus to developing a model for population health to support the provision of accessible and integrated care in the Fermanagh and West Tyrone area.

Over this challenging Covid period, Pathfinder developed new relationships and strengthened existing partnerships with key stakeholders. The Pathfinder Implementation working groups moved to all online meetings from March 2020. The role and purpose of Pathfinder Implementation groups temporality shifted as a result of Covid. The Implementation working groups focus moved from action planning to providing support, sharing of information, promotion of local accurate communications and to assist with the identification of gaps and acting on issues as they arose.

Pathfinder reflects a commitment to co-production in all its processes to deliver on integrated care. Throughout Covid, Pathfinder was able to gain a better and shared understanding of community based provision and new and creative ways were supported to deal with challenges with upwards of 70 organisations attending meetings every fortnight during March to June 2020 with upwards of 20 people per meeting in attendance.

During Covid, Pathfinder supported the development of a Virtual Social Work support model for GP practices in the South West GP Federation area. This test of change project provided virtual social work support direct to GPs in the Pathfinder geography. From the commencement of the project, on 8th June 2020 to the end of March 2021, there were 187 referrals to the Virtual Social Worker team from GP Practices within the Southern GP Federation area.

The Red Cross Connected Communities Project was established during 2020 and is working to support more connected services within the Gortin in Co.Tyrone and Belleek in Co.Fermanagh areas. These areas were identified by Pathfinder for this project due to lack of accessibility to services and the rural nature of their locations.

As part of the work with Pathfinder Implementation Groups, lessons learnt during Covid were gathered with a view to ensuring that any specific recommendations be kept in mind as part of moving forward Post Covid. These reflections included the value placed by partners on regular meetings and conversations through Pathfinder to be able to share knowledge, expertise outside of the more formal Trust structures. The use of virtual technology to support people to participate in meetings was well received by members as it promoted the inclusion of people and this was welcomed in particular by carers. However, concerns relating to the barriers to digital inclusion including access to broadband, and costs associated with having good connectivity remain an issue for the area. Considerations relating to a range of barriers to access will continue to be given attention by Pathfinder in developing connected care as part of a population health plan to be co-developed with partners during 2021 for the Fermanagh and West Tyrone area.

During 2020/21 in response to feedback from partners, data and research papers, Pathfinder has refined its areas for priority, Multi-morbidities and Mental Health. As part of the Multi Morbidity Oversight Group, the development of a model for Integrated System as a pilot for the Pathfinder area is being driven by data and need. A cross sectoral group has been established including a range of cross sectoral partners. The work of the Pathfinder Programme both links and works the traditional boundaries of where care is provided (hospital care, primary care and

community care) and with a focus on population health (groups effected by multi morbidities and mental health).

There is a strong commitment by Pathfinder to develop and apply a new model for Integrated Care underpinned by a Research Programme. Research strands are now well developed and this work is being led by a joint appointment by the University of Ulster and the WHSCT. The focus of this multi stranded research programme will be on multi morbidity and Carers.

The work of Pathfinder seeks to support partners to work together better to address the Health Inequalities within the catchment geography of Fermanagh and West Tyrone. Much progress has been made to establish arrangement's that support more joined up working between agencies with a responsibility or interest in communities. A range of actions are being supported that will improve health and wellbeing based on locally sensitive data. Pathfinder and FODC through the Community Planning Action Plan alongside DEARA and PHA are committed to working on actions that focus on improving wellbeing for the area including work with Section 75 groups to ensure improved equity of access to programs in the Southern Sector of the WHSCT area.

### **Public Information on New Build Facilities**

Projects which have completed in 2020-21 have continued to promote equality of opportunity and good relations. In particular, the new North Wing development at Altnagelvin has incorporated the principles of the Trust's wayfinding strategy, to enhance accessibility of services across the hospital site.

### **Personal and Public Involvement (PPI)**

The Western Trust's Integrated Involvement Plan is accessible via the Trust website and staff intranet. This is a strategic document outlining how the Trust will better integrate all the programmes of work across the Trust to ensure involvement is central to the culture of the Trust. This was developed alongside service users, carers, the community and voluntary sector and Trust staff.

The Trust has developed a new monitoring and verification process for PPI with more emphasis on the impact and outcomes around involvement. The Trust monitors against the standards for PPI which were developed by the PHA and endorsed by the Department of Health in 2015. The Trust is also working to develop processes, through which, it will implement the standards and objectives of the Department of Health's new Co-Production Guide. There are examples of models of co-production taking place within the Trust such as the Recovery College and Adult Learning Disability and these will be developed further in 2021/22.

The Trust involvement governance group, the 'Improvement through Involvement' committee is chaired by a non-executive director and aims to give leadership to ensure involvement is embedded as part of the Trust's culture. A service user and carer reference group will be developed to feed into this committee and ensure service user and carer voices are given a mechanism to be involved at this strategic level within the Trust.

'Engage' an online central resource for Involvement in Health and Social Care - <http://engage.hscni.net> continues to be promoted throughout the Trust. The resource is available to staff, service users, carers. The Trust has also developed its own online involvement hub to help make involvement more accessible to staff, service users and carers.

This can be accessed at <https://westerntrust.hscni.net/about-the-trust/involving-you/> and will be further developed in 2021/22.

### **WHSCT PPI Strategy & Action Plan 2018 – 2021**

The Trust's PPI Forum co-produced WHSCT's PPI Strategy and Action Plan 2018-2021 which aims to align PPI and Co-production and to embed Service user and carer involvement in the development and improvement of Directorate Services.

Utilising Transformation funding, the Trust continued to resource one full time temporary Band 7 Partnership Working Officer to support the development of the Trust's PPI/Co-production agenda across Directorates, as well as providing support to transformation projects within the Trust. Transformation funding was also utilised to support the development and recognition of service user involvement in the Trust.

### **PPI Adult Learning Disability (ALD)**

The service continued to develop a Hub and Spoke model of engagement for ALD Service users and carers to ensure an effective PPI approach to the development of the ALD services. Quarterly newsletters continue to be developed and can be accessed on the ALD online hub (<https://westerntrust.hscni.net/services/adult-services/adult-learning-disability-services/get-involved/>) and are also distributed to all service users and their carers. This work is now being supported by 3 dedicated involvement staff, a Band 8A Involvement Business Manager and 2 Band 6 Involvement Facilitators evidencing the Trust's commitment to involvement. Five Local ALD Involvement Groups meet on a monthly basis and have nominated their Representative on the Strategic Group which is a partnership of ALD senior staff and representative Service user/carers from the local groups.

### **HSC PPI Training Programme**

In 2019-20 the Trust rolled out a new 2 hour training programme to staff, 'Introduction to Involvement'. This was face to face training to provide staff with the skills, knowledge and confidence to carry out involvement. The sessions were interactive, allowing staff to engage with the facilitator to better understand how to make involvement a reality in their roles. In 2021/22 in response to Covid, these sessions are now done virtually and have still maintained a high level of engagement and interaction. It is the intention that these will move forward with a hybrid model of delivery. This training was underpinned by the already established eLearning module available to all staff, 'Engage and Involve', which supports staff to understand the value and benefit of involving people and taking into account people's views in the planning, commissioning, delivery and evaluation of HSC service.

The Trust also developed a clear and structured process to embed involvement into the local delivery of No More Silos. The Trust developed and delivered 2 webinars to inform and educate the public on the key objectives of NMS and developed a strong Involvement Reference Group to feed into the work streams. The Webinar can be found on the Trust's involvement hub along with the report from the event. Involvement is a standing item on the strategic project group for NMS showing the Trust's commitment to involvement from the outset of large programmes of work.

### **Training**

Training at all levels in the Trust has been significantly impacted by the Covid-19 pandemic with face to face training cancelled, unless essential, to ensure social distancing guidelines etc. are adhered to. Trust Staff are regularly advised of training available via frequent Trust

## PART A

Communications and team meetings and adhoc training is also delivered.

### **Training delivered/arranged by the Equality Team from 1 April 2020 to 31 March 2021:**

<b>Training</b>	<b>Training delivered by</b>	<b>No. Sessions</b>	<b>No of attendees</b>
Disability Awareness	Employers for Disability NI (EFDNI)	3	90
Making a Difference E-learning	Online	E-learning	6,277
Working with Interpreters	Equality Officer	1	3

#### **Deaf Awareness Training**

Discussions ongoing with British Deaf Association (BDA) re online training.

#### **Disability Awareness Training**

This training moved to online webinars with 3 sessions held for staff during 2020/21.

#### **Equality Screening Training**

While the face-to-face sessions of the training were cancelled, 1:1 support to Trust staff undertaking Equality Screening has increased.

#### **Visual Awareness Training**

Trust Equality staff currently liaising with RNIB staff regarding an online programme which will be rolled out throughout the Trust during 2021/22.

#### **Working with Interpreters Training**

Sessions of this training were cancelled during the reporting period however 1:1 support to staff regarding queries and concerns increased during this period.

#### **'Making a Difference' E-learning programme**

The Equality, Good Relations and Human Rights Training E-learning programme launched within the Western Trust in March 2018. The programme was developed regionally by HSC Equality Leads and a number of Western Trust staff participated in the pilot of the programme in early 2017.

'Making a Difference' is an interactive programme tailored specifically to the healthcare setting and aims to ensure that all staff realise the importance of their part in creating an inclusive and welcoming environment for all colleagues and service users.

The programme is provided in two modules – a general module applicable to all HSC staff and an additional module for those with management responsibilities. The modules are scenario-based to capture a range of practical and contemporary equality and diversity issues across employment and service provision. The programme replaces the 'Discovering Diversity' e-learning programme as the mandatory e-learning training for staff within the Western Trust and all staff are required to complete this.

'Making a Difference' is supported by a regional Equality Training manual for staff which

complements the programme. Staff can download a copy of the training manual via the programme. The programme is also complemented by a suite of HSC Discovering Diversity awareness modules, which all staff are also encouraged to complete.

The aim of the ‘Making a Difference’ training is to show staff how they can make a difference by:

- Promoting positive attitudes to diversity
- Ensuring they treat everyone with respect and dignity
- Behaving in a way that is in keeping with HSC values and equality and human rights law

During 2020/21 uptake of the training increased and plans are in place to deliver the training during 2021/22 via zoom to staff who do not have access to Trust computers. The programme will be updated in 2021 to reflect changes to legislation etc.

Other training normally held within the Trust but impacted by the pandemic includes;

### **Sexual Orientation Awareness Training and Transgender Awareness sessions**

Sessions were previously delivered by HERe NI, a community organisation and registered Belfast charity supporting lesbian and bisexual women and families and improving the lives of L & B women across Northern Ireland, through providing information; peer support; facilitating training; lobbying government and agencies.

### **Provision of Foreign Language Interpreting**

The Trust Equality Team continues to provide information and advice in relation to Interpreting. Due to the pandemic, the Working with Interpreters Training for Trust staff was only delivered to a small number of staff during this reporting period. Trust Communications providing information and advice on Interpreting and Translation Services were regularly issued and 1:1 support provided to staff increased.

Equality staff continue to work closely with the Business Services Organisation (BSO) who manage the Northern Ireland Health and Social Care Interpreting Service (NIHSCIS) (face to face interpreting provider). Equality staff worked with the NIHSCIS Manager to ensure that Interpreters were able to receive their flu and Covid-19 vaccine in a timely manner.

The Trust continues to provide a robust face to face and telephone interpreting service for patients/clients who do not have English as a first language. This is part of the Trust’s commitment to ensuring and promoting equality of access to all our services. Due to the pandemic, demand for Telephone interpreting increased within the reporting period, this service is provided by The Big Word.

The top 5 languages during the 2020-21 reporting period remain:

- Polish
- Arabic
- Lithuanian
- Hungarian
- Bulgarian.

### **Traveller Health and Wellbeing Programme**

The Traveller Health and Wellbeing Programme aims to improve the health outcomes of Travellers across the Western Trust area. The programme sits within the Western Trust, Health Improvement, Equality and Involvement Department. Much of the core work of the programme was impacted by the Covid 19 restrictions. However the programme continued to engage with as many Travellers as possible, supporting them to access a wide range of services including Covid 19 supports provided by the local community/voluntary sectors.

The Western Traveller Action Group continued to meet via Zoom and although hampered, did make some progress. One of its key actions is to support the establishment of a Traveller led organisation and build meaningful Traveller participation. The first step involved obtaining the views of as many Travellers across the Western Trust area. Some 87 responses were received with 97% expressing support for the development of a Traveller led organisation. Following on from the survey two zoom meetings were held, all the Travellers who had indicated that they would like to get involved were invited. The meetings had limited success. The overall view was that there needed to be a face to face meeting which will be arranged when safe to do so.

### **Western Trust Disability Steering Group (DSG)**

Previously, due to changes to staffing within Directorates and resources, the group, which includes representatives from the Community & Voluntary sector, the Patient Client Council and Trust Staff had not met for a number of years. This was to be an area for priority for the Trust, particularly given the introduction of the new Regional Disability Action Plan 2018-2023 and associated Trust Action Plan, however, as with much of our work the global pandemic has meant that the reinstatement of the group was delayed.

### **Self-Directed Support (SDS)**

The Western Health & Social Care Trust continue to imbed 'Self Directed Support (SDS) personalisation agenda within the 5 Programmes of Care. At the end of March 2021 the Trust had 6605 packages of care & support which had been worked through this process:

- 1318 Direct Payments
- 1 Managed Budget
- 4656 Trust Arranged Services
- 630 Cost Neutral Cases

SDS had also worked to provide 874 One-off Payments for individuals in receipt of services. The number of One-Off and recurrent payments reported for carers continues to increase. It is important to note that 562 packages had ceased between April 2020 and the end of March 2021.

During the Covid-19 period the SDS Leads regionally met virtually each week and had worked alongside the HSCB and Department of Health when required to respond to needs identified as a result of the pandemic. This work involved:

- Drafting & disseminating correspondence regarding entitlement to a free Winter Flu Vaccination for Personal Assistants (PAs) employed by Direct Payment Recipients;
- Communicating and facilitating arrangements for delivering Personal Protective Equipment for Direct Payment Recipients, their PA's and Carers throughout the Covid-19 Pandemic;
- Providing regional consistency across all Trusts in delivering initial COVID-19 support

and following detailed discussions, assisting with the development of Department of Health ‘Coronavirus (COVID 19): Northern Ireland Guidance for People Receiving Direct Payments’ alongside a related ‘Questions & Answers Paper Regarding the Use Of Direct Payments during the COVID-19 Pandemic’ currently being implemented across all HSC Trusts;

- Establishing arrangements for Trust Staff to enable PA’s employed through Direct Payments to use Translink’s offer of free public transport travelling to and from their place of work during the COVID-19 Pandemic;
- Ensuring Trust-specific consistency for PAs paid via Direct Payments and the Independent Living Fund to access the COVID-19 Vaccination Programme;
- Devising and agreeing regional processes and paperwork for the pioneering of regional Emergency Direct Payments to assist with hospital discharges once individuals were declared medically fit;
- Supporting regional development of the Independent Information Advice and Advocacy Service through facilitating detailed Trust-specific data mapping and agreeing a regional Data Protection Impact Assessment.

Currently Trust Self Directed Support Leads are undertaking a major piece of work in redrafting detailed Direct Payment Guidance to be issued across all Trusts separately for Staff & Direct Payment Users to ensure regional consistency in relation to processes and documentation utilised.

### **Recovery College**

The Western Trust’s Recovery College continues to offer free psycho-educational courses and workshops promoting meaningful recovery, self-management and hope. Courses are free and open to all those who experience mental health difficulties, their families and supporters and are held throughout the Trust area.

With the onset of the Covid pandemic and the associated restrictions, the Recovery College adapted to meet the needs of its students, initially with its Reaching Out Campaign. This included fortnightly newsletters and, in collaboration with various mental health professionals throughout the Trust, the production of a range of videos on mental health. These were promoted on the Trust’s social media channels and are a valuable permanent resource which can be accessed at any time on the Trust’s Youtube channel and on the Recovery College page on the Trust’s website. With restrictions still in place in Spring 2021, the College increased its online presence and moved delivery of courses to the Zoom platform enabling students in rural isolated areas, and those hard to reach target groups, to engage with the college. This has been very successful and the College plans to incorporate zoom courses into future curriculums. Monies from the Innovation Fund allowed the College to facilitate a range of creative workshops, delivered via Zoom into day care/supported living settings which again has widened access to the Recovery College and encouraged connection at a time when people were feeling very isolated.

In August 2020, the Recovery College successfully recruited its first full-time permanent Lead Peer Educator who was previously a Recovery College student and volunteer. The Recovery College continues to grow and mentor its very capable cohort of volunteers with lived experience.

### **Mental Capacity Act (NI) 2016**

The Mental Capacity Act (NI) 2016, (MCA), which became law on 31 May 2021, provides a statutory framework for people who lack capacity to make a decision and are deprived of their liberty. When fully implemented it will bring together mental capacity and mental health legislation under the one legislative framework to protect some of the most vulnerable people in our community.

Where a person lacks capacity and they are being deprived of their liberty, for example in a nursing home or hospital facility, a Deprivation of Liberty with its safeguards must be applied. The Trust has the duty to ensure that everyone who is currently deprived of their liberty has had their circumstances reviewed and that, where appropriate, the relevant safeguards are in place with a Trust Panel Authorisation agreed by a Trust Panel. Panel is made up of three senior professionals including those with a medical and social work background.

The MCA Implementation Team ensures that training is made available to Trust staff to assist with their understanding of their responsibilities and roles within the legislation and to develop and support the processes required for the implementation of the legislative requirements. Additional support is provided through managers' workshops, staff support sessions and bespoke training for those impacted by the MCA legislation.

The Department of Health has recently issued guidance to staff to support ongoing challenges in implementing the requirements under the Act ensuring that emergency provisions provide staff with protection from liability if they take all reasonable steps to implement the additional safeguards as soon as practically possible.

### **Improving the Health and Wellbeing of Trust Staff**

Investment and development into supporting staff well-being throughout the COVID pandemic and beyond has been a priority for the Trust. The Trust's Twist West programme was adapted so that staff could access from their mobiles without passwords. The #WeAreWithYou programme of work was developed and promoted to provide staff with resources and information to support them to manage their emotional health and wellbeing, including a weekly newsletter circulated widely. A range of programmes were developed for staff in response to support physical activity and mental health including a 6 week Pilates programme, mindful sleep sessions, strengthening resilience programme, Move More Quality Improvement physical activity project, using aromatherapy to manage emotions, reflect and recharge programmes.

HIEI staff worked with the acute directorate to provide 68 chaplaincy packs for staff and patients on covid wards. The chaplaincy work includes work to support those of all faiths and none. Work to support staff wellbeing with the chaplains is ongoing and includes resource and programme development on spiritual inspiration and support for staff and patients across the lifespan.

### **Care Opinion**

Care Opinion, introduced within the Trust on 3 August 2020, is an independent non-profit feedback platform for HSC, supported by the Department of Health and implemented by the Public Health Agency (PHA). It enables service users and their families, anonymously, to give real time feedback on their Health and Social Care received and share their stories with others in a safe and simple manner. To make the system more accessible there are a number of options people can choose e.g. British and Irish Sign language, ability to change font sizes and contrasts for anyone with visual impairment. A wide selection of languages are also accessible. For those with sensory or communication difficulties there is also the opportunity to

use pictures, i.e. Talking mats to share their experiences. Those submitting stories are also requested to complete Equality Information e.g. their gender, age, whether they have a disability etc.

Managers and designated responders within the Trust are able to respond directly using the platform. During the COVID 19 pandemic, Zoom training sessions for responders were coordinated by the Trust Patient Client Experience facilitator and Care Opinion Team based in Sheffield. For this reporting period this service had:

- 94 stories told (August 2020 until March 2021)
- 18,000 public views
- 93% of staff responded to stories within time frame of 7 days

### **Consulting with staff**

Staff ideas and a TWIST west survey have helped to shape the type of programmes and menu of activities that are provided in the area of staff health and wellbeing. A long COVID working group has been established to explore ways to support staff who are experiencing symptoms of long COVID, this includes a pilot Managing the Pain Long-COVID Group for Trust staff.

### **Childcare Support for Staff**

As a result of the pandemic, extensive support was being provided to support our staff who are working parents. This was reviewed on an ongoing basis given the fluidity of the situation with the pandemic.

HSC worked with childcare providers and the education sector to cater for employees with childcare needs. Schools reopened in September 2020 which eased the childcare needs of working parents. From late September 2020 there was an increase in the number of staff, and their children, self-isolating due to Covid-19 and this presented additional childcare issues. Staff were offered opportunities to work flexibly to fulfil the needs of both childcare and work. This includes home working and alternative shift patterns. Staff are also encouraged to use other forms of leave to address childcare needs.

On 31 March 2020, the Trust issued an on-line survey to staff with regards the childcare needs of our frontline workers. Additionally, contact was made with line managers and Trade Union colleagues to contact those staff off work, without access to Trust e-mail, to get in touch with the Improving Working Lives Team in HR if they had any childcare issues.

### **The key policy and service developments to better promote equality of opportunity and good relations are outlined as follows:**

- 1.1 The Trust continues to mainstream Equality/Section 75 duties throughout the Trust.
- 1.2 Procedures are in place to ensure that new and revised polices are subject to Equality Screening and Equality Impact Assessment (EQIA) where applicable.
- 1.3 COVID 19 has impacted on the training delivered within the period, however staff continue to adapt programmes where possible. See Section 24 of this report for detail re training delivered during 2020-2021.
- 1.4 The Trust continues to promote effective internal and external communication via a wide range of media.

PART A

- 1.5 The Trust is committed to making its services accessible and information available in alternative formats.
- 1.6 During this reporting period the E&I Team refreshed the Trust local consultee database to support effective consultation and engagement.
- 1.7 The Trust provides an accessible complaints procedure for all patients and clients and continues to monitor complaints received.
- 1.8 The Equality Team maintain a screening log which is updated regularly and records equality assurance processes.
- 1.9 Quarterly Equality Screening Reports outlining the screening outcomes of all policies/proposals approved in the quarter have been made available since 1 April 2011. Reports can be accessed on the Trust's website and staff intranet. Consultees are advised of the availability of the reports.
- 1.10 As recommended, by the Equality Commission's Guidance for Public Authorities on the Implementation of Section 75, the Western Trust Equality Scheme is accompanied by an Action Based Plan (Equality Action Plan).
- 1.11 Applicants for posts within the Western Trust are requested to complete Section 75 information. Those applying online via HSCRecruit can voluntarily complete the Equal Opportunities Monitoring form which includes their section 75 information
- 1.12 With the introduction of the Human Resource, Payroll, Travel and Subsistence (HRPTS) system staff can maintain and change Equality and Diversity data, apart from Community Background. However, staff who are appointed and who we have not entered a perceived community background can change their record to reflect their community background. It is anticipated that this will aid accurate reporting on Section 75 data.
- 1.13 The Western Trust's Head of E&I is a member of the Regional Equality and Human Rights Steering Group (REHRSG). REHRSG bi-monthly meetings are led by the Department of Health (DoH), in partnership with HSC Equality Leads. As a member of this Forum the Head of E&I shares information and updates from the regional meetings with Trust Directors on a regular basis.
- 1.14 Considerable work has been undertaken during this reporting period with regard to supporting carers. The Trust employs a full-time Carers coordinator and Carers Development worker. The Carers Support Team reviewed and updated the Carers Mailing List. At the end of the reporting year the Carers Support Team were in contact with 2,080 carers on their mailing list. Those registered on the mailing list receive a regular Carers Newsletter. 1500 Carers are receiving weekly electronic information shots in addition to the Carers Newsletter. The team developed and delivered a programme of online health and wellbeing events via Zoom during lockdown and will continue to incorporate online events into the regular events programme. The team also coordinated the unpaid carers Covid 19 vaccination programme referring over 3,000 carers for vaccination.

NB: The list is not exhaustive; it is a highlight of some of the key policy and service developments for this reporting period.

PART A

- 2 Please provide **examples** of outcomes and/or the impact of **equality action plans/ measures** in 2020-21 (or append the plan with progress/examples identified).

Please see Appendix 1 and Appendix 2 for a detailed update of actions progressed in year 3 (2020-2021) of the Equality Action Plan and the Disability Action Plan

- 3 Has the **application of the Equality Scheme** commitments resulted in any **changes** to policy, practice, procedures and/or service delivery areas during the 2020-21 reporting period? (tick one box only)

Yes       No (go to Q.4)       Not applicable (go to Q.4)  
Please provide any details and examples:

Ongoing:

Equality Screening has emphasised the need for staff to consider how they involve people as early as possible in decision making. It also emphasises the need to consider providing information in alternative formats.

The Trust has prioritised Section 75 in all aspects of its business agenda and has established a range of governance, management and reporting mechanisms that reflect this. The Trust's Equality Team provides staff with the information, training and resources to support staff to have the appropriate level of knowledge, expertise and skill to mainstream S75 duties.

Service Users and Staff have access to both foreign and sign language interpreting as well as translated information.

The regional Equality, Good Relations and Human Rights; Making a Difference eLearning programme is mandatory and compliance is monitored.

Trust Consultation list continues to be reviewed.

- 3a With regard to the change(s) made to policies, practices or procedures and/or service delivery areas, what **difference was made, or will be made, for individuals**, i.e. the impact on those according to Section 75 category?

Please provide any details and examples:

Please also refer to response to Section 1 in this document.

Screening of policies, practices or procedures and/or service delivery areas has resulted in many considerations on how to promote equality of opportunity and good relations. For example there is better engagement with those affected by policies and decisions including with service users and carers.

#### **Accessible Communication**

Emphasis placed on the need to provide information in alternative formats for

service users/visitors and staff etc. Also to consider how information is communicated to staff.

### **Human Resources Payroll and Travel System (HRPTS)**

This system means that staff are now able to update their own Equality and Diversity Data, apart from Community Background (unless they are newly appointed to the Trust). This provides more accurate data for Equality Screening and Equality Impact Assessments (EQIA).

### **Western Trust Local Consultee List**

The Trust's local consultee list is updated regularly by Equality staff.

### **Regional HSC Consultee List**

This list is regularly updated.

**3b** What aspect of the Equality Scheme prompted or led to the change(s)? (*tick all that apply*)

As a result of the organisation's screening of a policy (*please give details*):  
WHSCT Medical Devices Policy – as a result of Equality Screening this policy the Assistant Director added a paragraph to the document regarding Communication with service users/families/carers. The paragraph reinforces the need for staff to ensure that communication support needs are met when in receipt of Medical Devices.

As a result of what was identified through the EQIA and consultation exercise (*please give details*):  
Examples provided above

As a result of analysis from monitoring the impact (*please give details*):

The Trust continues to monitor its workforce across the nine equality categories. This monitoring information is used for all section 75 screening of proposal that impact on staff. This supports the assessment of impact and the identification of potential of adverse impact.

As a result of changes to access to information and services (*please specify and give details*):

The provision of interpreters and translated accessible information continues to result in effective information provision and better communication in situations where a clear understanding is required.

A new Remote sign Language Interpreting Service was introduced to assist with issues accessing face to face interpreters during the pandemic and aid with social distancing and infection prevention and control measures.

The Trust website includes links to translated and Easyread versions of leaflets that provide information on matters relating to Covid.

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- Other (*please specify and give details*):

The WHSCT Complaints Team considers specific Section 75 related complaints and promotes positive action as required.

The Equality office have developed training and briefings for service areas in relation to Effective Consultation and undertaking EQIAs which supports existing training for staff.

## Section 2: Progress on Equality Scheme commitments and action plans/measures

### Arrangements for assessing compliance (Model Equality Scheme Chapter 2)

4 Were the Section 75 statutory duties integrated within job descriptions during the 2020-21 reporting period? (*tick one box only*)

- Yes, organisation wide
- Yes, some departments/jobs
- No, this is not an Equality Scheme commitment
- No, this is scheduled for later in the Equality Scheme, or has already been done
- Not applicable

Please provide any details and examples:

5 Were the Section 75 statutory duties integrated within performance plans during the 2020-21 reporting period? (*tick one box only*)

- Yes, organisation wide
- Yes, some departments/jobs
- No, this is not an Equality Scheme commitment
- No, this is scheduled for later in the Equality Scheme, or has already been done
- Not applicable

Please provide any details and examples:

The national Knowledge and Skills Framework (KSF) continues to be the process linked to annual development reviews of all Trust staff and personal development plans. Equality and diversity is one of the 6 Core Dimensions and it reflects a key aspect of all jobs and underpins all dimensions in the KSF. During the reporting period the Trust continued to focus on the completion of appraisals to ensure staff have the knowledge and skills they need to do their job and that key areas for development are identified.

In response to the ECNI report ‘Section 75 statutory Equality and Good Relations Duties: Acting on the evidence of public authority practices’ June 2018 and in recognition that effective leadership is critical to the successful implementation of our Equality Scheme, new guidance for Board Members was drafted in March 2020. With an emphasis on mainstreaming equality the guide aims to support HSC Board Members to understand the statutory Board responsibilities as they relate to matters of equality, good relations and human rights.

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'Equality' is one of the 5 core mandatory training requirements for all staff and Mandatory Training is a key component of the appraisal discussion. Therefore, Equality Training forms part of every Personal Development Plan created through this process.

In addition Equality Screening training and Working with Interpreters training is available.

6. In the 2020-21 reporting period were **objectives/ targets / performance measures** relating to the section 75 statutory duties **integrated** into corporate plans, strategic planning and or operational business plans? ( tick all that apply)

- Yes, through the work to prepare or develop the new corporate plan
- Yes, through organisation wide annual business planning
- Yes, in some departments / jobs
- No, these are already mainstreamed through the organisations ongoing corporate plan
- No the organisation's planning cycle does not coincide with this 2020 - 2021 report
- Not applicable

The Trust continues to prioritise Section 75 within all aspects of its business agenda and has established a range of governance, management and reporting mechanisms to reflect this. Equality sits within the Performance and Service Improvement Directorate and supports all Trust Divisions to ensure Section 75 is mainstreamed and integral to planning processes.

### **Commitment to Consultation**

Central to the Trust's main Personal and Public Involvement and Equality Scheme commitments is the responsibility to work in close partnership with service users, carers, groups and organisations from all sectors – community, voluntary and statutory. The Trust upholds its commitment Consultation in line with the HSC Reform act to ensure service users, carers and the public are consulted on the planning, development, delivery and decisions for the provision of care.

In taking forward consultation the Trust shall continue to further embed involvement processes and community development approaches to support local involvement and innovation in the future delivery of services including working in partnership with other community, voluntary and statutory organisations.

## Equality action plans/measures

- 7 Within the 2020-21 reporting period, please indicate the **number** of:

Actions completed:	<b>19</b> Regional	Actions ongoing:	<b>12</b> Regional	Actions to commence:	<b>7</b> Regional
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Within the local Equality Action plan of actions are over the lifespan of the plan.

Examples provided in Appendix 1 and Appendix 3

- 8 Please give details of changes or amendments made to the equality action plan/measures during the 2020-21 reporting period (*points not identified in an appended plan*):

A detailed update is provided in Appendix 1

- 9 In reviewing progress on the equality action plan/action measures during the 2019-20 reporting period, the following have been identified: (*tick all that apply*)

- Continuing action(s), to progress the next stage addressing the known inequality
- Action(s) to address the known inequality in a different way
- Action(s) to address newly identified inequalities/recently prioritised inequalities
- Measures to address a prioritised inequality have been completed

## Arrangements for consulting (Model Equality Scheme Chapter 3)

- 10 Following the initial notification of consultations, a targeted approach was taken – and consultation with those for whom the issue was of particular relevance: (*tick one box only*)

All the time       Sometimes       Never

- 11 Please provide any **details and examples of good practice** in consultation during the 2020-21 reporting period, on matters relevant (e.g. the development of a policy that has been screened in) to the need to promote equality of opportunity and/or the desirability of promoting good relations:

The Trust recognises the importance of proper and timely consultation as an integral part of fulfilling its Section 75 obligations when making decisions and planning services. For all public consultations the details are sent out to over individuals, groups and organisation on the Trust's Consultation Database. Consultation documents are made

## PART A

available on the Trust's website with the consultation document is available in alternative formats. Following consultation, a detailed consultation feedback report is drafted and time is taken to consider all the responses. All of those who provided feedback and participated in the consultation process are informed of how their feedback influenced the final decision. During the reporting period no public consultations were carried out however work continues to support personal and public involvement and co-production.

As a result of the Covid-19 pandemic, the Trust had to make decisions and take actions at short notice to ensure that patient, service user and staff safety remained our priority. There has been a considerable amount of innovations and change in practice to enable COVID-19 safe working practices, including widespread use of telephone triage, virtual clinics and video calls. Building on this will involve, working closely with our primary care and community partners and our clinical and social care leaders, using flexible and remote working where appropriate and rapid scaling up of technology. We are also engaging with our frontline staff to reflect on the many "lessons learned" and further work will continue on this to inform our plans going forward. The Trust is actively involved in the regional Service Delivery Innovation work-stream, who have identified a number of key initiatives which will be mainstreamed, including virtual visiting and virtual consultations

During this reporting period there has been a considerable amount of innovations and change in practice to enable COVID-19 safe working practices, including widespread use of telephone triage, virtual clinics and video calls. Building on this will involve working closely with our primary care and community partners and our clinical and social care leaders, using flexible and remote working where appropriate and rapid scaling up of technology. We also continue to engage with our front line staff to reflect on the many "lessons learned" and further work will continue on this to inform our plans going forward. The Trust is actively involved in the regional Service Delivery Innovation work-stream who have identified a number of key initiatives which will be mainstreamed, including virtual visiting and virtual consultation.

The Equality Screening forms for the Covid Surge and Rebuild plans etc. provide assurance that a full EQIA and public consultation will be carried out on any actions detailed within the plan that may be taken forward on a permanent basis.

### **Adult Learning Disability - PPI**

Adult Learning Disability - PPI The Trust Involvement team continues to develop and support the ALD strategic and local implementation approach to ensure engagement with ALD service users and carers are at every level of ALD services. 2 Local Involvement Facilitators and 1 Involvement Manager have been recruited to support this process.

Since the onset of COVID 19 until end April 2021 a total of **34** Local Involvement Group (LIG) Meetings have been facilitated across the WHSCT area. These have been a mix of face-to-face and online meetings due to restrictions. Online arrangements have been challenging for some while the concern and fears of carers have affected attendance at face to face meetings. The meetings are held 6-8 weekly and are planned until end Dec 21. The Involvement facilitators and Involvement Manager develop and co-ordinate a range of programmes of work arising from the discussions at the Involvement groups.

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The Strategic Involvement Group last met in Feb 2020 but was regrouped and met on 5<sup>th</sup> May 21. These meetings have been arranged quarterly for the remainder of the year. A workshop was arranged to co-produce an Involvement Action Plan for Adult Learning Disability services took place in March 2021, with representation from the LIGs across the Trust area.

- 12 In the 2020-21 reporting period, given the consultation methods offered, which consultation methods were **most frequently used by consultees**: (*tick all that apply*)

- Face to face meetings
- Focus groups
- Written documents with the opportunity to comment in writing
- Questionnaires
- Information/notification by email with an opportunity to opt in/out of the consultation
- Internet discussions
- Telephone consultations
- Other (*please specify*):

Please provide any details or examples of the uptake of these methods of consultation in relation to the consultees' membership of particular Section 75 categories:

The Trust adapts the format and/or content of its consultation and its method of engagement in accordance with the subject matter. We provide a range of materials and means of engagement or consultation to meet the needs of all relevant consultees. No formal consultation was undertaken during this period but there was a significant volume of engagement, involvement and co-production. Including within Adult Learning Disability, Good Relations and PathfinderWest. The pandemic necessitated new ways of communicating including the use of Zoom and other online platforms.

**See also response to 11.**

- 13 Were any awareness-raising activities for consultees undertaken, on the commitments in the Equality Scheme, during the 2020-21 reporting period? (*tick one box only*)

- Yes
- No
- Not applicable

Please provide any details and examples:

New/Updated documents are forwarded regularly to those on the Trust Consultee List following approval within the Trust including e.g. ECNI Annual Progress Reports, Quarterly Screening Reports, Rural Needs Report. They are also advised of Consultations and Events including the Trust Engagement Event, where they had the opportunity to learn of PPI work ongoing within the Trust. Staff training, Equality section on the Trust website.

Those on the Regional Consultee list were advised of the Regional HSC Good Relations Statement.

- 14 Was the consultation list reviewed during the 2020-21 reporting period? (*tick one box only*)

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Yes       No       Not applicable – no commitment to review

The Western Trust Local Consultee list is reviewed on an ongoing basis.

- 15 Please provide the **number** of policies screened during the year (as recorded in screening reports):

7

- 16 Please provide the **number of assessments** that were consulted upon during 2020-21:

0
0
0

Policy consultations conducted with **screening** assessment presented.

Policy consultations conducted with **an equality impact assessment** (EQIA) presented.

Consultations for an **EQIA** alone.

While no public consultations were conducted during this reporting period comprehensive Equality Screenings have been completed in response to plan relating to the Covid-19 pandemic.

- 17 Please provide details of the **main consultations** conducted on an assessment (as described above) or other matters relevant to the Section 75 duties:

N/A

- 18 Were any screening decisions (or equivalent initial assessments of relevance) reviewed following concerns raised by consultees? (tick one box only)

Yes       No      concerns     No       Not applicable  
were raised

Please provide any details and examples:

N/A

**Arrangements for publishing the results of assessments (Model Equality Scheme Chapter 4)**

- 19 Following decisions on a policy, were the results of any EQIAs published during the 2020-21 reporting period? (tick one box only)

Yes       No       Not applicable

Please provide any details and examples:

N/A

**Arrangements for monitoring and publishing the results of monitoring (Model Equality Scheme Chapter 4)**

**20** From the Equality Scheme monitoring arrangements, was there an audit of existing information systems during the 20120-21 reporting period? (*tick one box only*)

- |                                     |   |                          |                         |
|-------------------------------------|---|--------------------------|-------------------------|
| <input checked="" type="checkbox"/> | Yes   | <input type="checkbox"/> | No, already taken place |
| <input type="checkbox"/>            | No, scheduled to take place at a later date | <input type="checkbox"/> | Not applicable          |

Please provide any details:

Staff Monitoring continues via HRPTS to ensure the Trusts has an up to date equality profile of its workforce to support more effective screening of proposals and policies which may have an impact on staff.

Collection and analysis of interpreting provision: Sign Language and Foreign Language – please refer to appendix 4 of this report.

Monitoring of interpreting identifies the top 5 languages requested in the Trust - please refer to appendix 4 of this report.

**Encompass**

The Encompass Programme will introduce a digital integrated care record to Northern Ireland supporting the HSCNI vision to transform health and social care in order to improve health outcomes and create better experiences for those receiving, using and delivering services. The programme is supported by all five of the Health and Social Care Trusts, the Public Health Agency, BSO, the Health and Social Care Board, Northern Ireland Ambulance Service and the Department of Health and led by professionals from across HSCNI.

The Programme is working closely with the chosen supplier, Epic and HSCNI subject matter experts in preparation for build and design of a system that is fit for purpose in Northern Ireland. Readiness and working groups are being established and will include staff and service users to make decisions based on development and delivery of care plans, test results, medication records, communication and mobility needs and appointments – all needed to ensure the individual gets the best care. This will enhance and streamline HSCNI records and systems by reducing duplication and unwarranted variation.

**21** In analysing monitoring information gathered, was any action taken to change/review any policies? (*tick one box only*)

- |                          |     |                                     |    |                          |                |
|--------------------------|-----|-------------------------------------|----|--------------------------|----------------|
| <input type="checkbox"/> | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | Not applicable |
|--------------------------|-----|-------------------------------------|----|--------------------------|----------------|
- Please provide any details and examples:

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- 22** Please provide any details or examples of where the monitoring of policies, during the 2020-21 reporting period, has shown changes to differential/adverse impacts previously assessed:

N/A

- 23** Please provide any details or examples of monitoring that has contributed to the availability of equality and good relations information/data for service delivery planning or policy development:

**Staff Monitoring** - has helped produce real time data to inform future equality screenings and Equality Impact Assessments in determining the impact of service changes on those potentially affected. Staff monitoring has also been useful to determine any policy gaps e.g. transgender policy. The Trusts completes an Article 55 review report every 3 years.

**HSC Audit of Inequalities Document** - HSC Organisations worked collaboratively to gather and update the emerging themes in relation to key inequalities experienced by the 9 equality categories. Collated data (qualitative and quantitative) was analysed and is defined, by Section 75 categories, to help develop indicators of levels of inequalities. The Audit of Inequalities document can be used as evidence for future screening and equality impact assessments and is a useful resource for both health and social care staff and representative organisations.

**Ethnic Monitoring of Service Users** – continues on a number of HSC information systems including Child Health System, SOSCARE and NIMATS.

**Updating of Trust Local Consultee List** – allows Trust to ensure that information is accurate and up to date when issuing information re consultations/reports etc.

## Staff Training (Model Equality Scheme Chapter 5)

- 24** Please report on the activities from the training plan/programme (section 5.4 of the Model Equality Scheme) undertaken during 2020-21, and the extent to which they met the training objectives in the Equality Scheme.

Training at all levels in the Trust has been significantly impacted by the Covid-19 pandemic with face-to-face training cancelled, unless essential, to ensure social distancing guidelines etc. are adhered to. Trust Staff are regularly advised of online training available via frequent Trust Communications and team meetings and adhoc training is also delivered. One to one support provided to staff on Equality Screening and Interpreting etc. has increased.

The training detailed below includes reference to/information on the Section 75 duties and Disability Duties. Further content is then developed to meet the requirements of the participants and the specific focus of the training. Much of the training is delivered by Trust staff, however for some training programmes delivery is in partnership with voluntary sector groups.

### **'MAKING A DIFFERENCE' E-Learning Programme**

This E-learning programme was launched in the Western Trust in March 2018 as mandatory Equality, Good Relations and Human Rights Training for all WHSCT Staff and managers. The programme was developed regionally by HSC Equality Leads.

'Making a Difference' is an interactive programme tailored specifically to the healthcare setting and aims to ensure that all staff realise the importance of their part in creating an inclusive and welcoming environment for all colleagues and service users. It replaces 'Discovering Diversity' as the mandatory e-learning training for all WHSCT staff.

The programme is provided in two modules – a general module applicable to all HSC staff and an additional module for those with management responsibilities. The modules are scenario-based to capture a range of practical and contemporary equality and diversity issues across employment and service provision. The programme replaces the Discovering Diversity e-learning programme as the mandatory e-learning training for staff within the Western Trust and all staff are required to complete this.

'Making a Difference' is supported by a regional Equality Training manual for staff which complements the programme. The programme is also complemented by a suite of HSC Discovering Diversity awareness modules, which all staff are also encouraged to complete.

The aim of the 'Making a Difference' training is to show staff how they can make a difference by:

- Promoting positive attitudes to diversity
- Ensuring they treat everyone with respect and dignity
- Behaving in a way that is in keeping with HSC values and equality and human rights law.

During 2020/21 uptake of the training increased and plans are in place to deliver the training during 2021/22 via zoom to staff who do not have access to Trust computers. The programme will be updated in 2021 to reflect changes to legislation etc.

**VISUAL AWARENESS** Training: normally delivered face-to-face throughout the Trust by Eyecare Liaison Officers from RNIB. This training provides staff with skills and knowledge to ensure that service users with a visual impairment receive a high level service. Equality staff have provided feedback to RNIB on an online training programme they are developing.

**DEAF AWARENESS** Training: normally delivered face to face by the British Deaf Association (BDA) throughout the Trust, the training includes an Introduction to deafness/Hearing loss and provides information on Communication Methods used by Deaf/Hard of Hearing people and how to communicate clearly. Equality staff continue to liaise with BDA re possibility of delivering the training online.

**DISABILITY AWARENESS** Training: normally delivered face-to-face by Employers for Disability NI (EFDNI). EFDNI have adapted the training to deliver it via zoom to Trust staff. 3 sessions were held during the reporting period with 90 staff in attendance. The training covers Disability Discrimination Act (DDA) overview and case law with a brief

overview of legislation followed by case study exercise using DDA cases. A variety of learning methods are used including an exercise on Language etiquette and Disability awareness training video clips. There is also an overview of five key disability areas; hearing loss, visual disability, learning difficulty and disability, physical disability and hidden disability, including mental health. Information is provided on the nature and extent of disability, as well as good practice in interacting with people with disabilities.

**WORKING WITH INTERPRETERS** (Foreign Language/Sign Language) Training: this training is usually delivered face-to-face on an on-going basis throughout the Trust. The training aims to improve the experience of patients/clients who do not have English as a first language or who have a hearing impairment. The Equality & Involvement Team also offers the training to specific teams/units, as per requests. The Working With Interpreters Training is supported by Trust Communication Support Guidelines, which contain information for staff on accessing Foreign Language and Sign Language Interpreters, and Written Translation.

**EQUALITY SCREENING** Training: continues to be delivered by Equality staff as and when required to Senior Managers and their staff who are involved in developing policies/ proposals/strategies and implementing changes to services. The training provides information on Section 75 of the NI Act 1998 and requirements under Section 75 for Public Authorities; and informs staff why and when screening needs to take place and how to screen.

**EQIA TRAINING:** the Equality Team offer specialist support and training to staff within Directorates who are involved in EQIAs/consultation exercises, on request.

**'LESBIAN, GAY, BISEXUAL and/or TRANSGENDER - CREATING INCLUSIVE WORKPLACES'**

E-Learning Programme: available to all Trust staff. This e-learning programme was developed by the Public Health Agency in partnership with the Southern Health and Social Care Trust and has been informed by the experiences of individuals who identify as Lesbian, Gay, Bisexual and/or Transgender (LGBT).

The programme is designed to be used by individuals, including staff and management, working in any setting. It is hoped that it will better inform individuals and organisations on the issues faced by lesbian, gay, bisexual and transgender and help encourage workplace settings to be more LGBT inclusive, thus helping to create a more welcoming, safe and productive work environment.

- 25** Please provide any examples of relevant training shown to have worked well, in that participants have achieved the necessary skills and knowledge to achieve the stated objectives:

All of the above training, with the exception of the eLearning training, has been evaluated. Overall evaluation feedback has been positive with staff finding that training was relevant, practical and thought-provoking.

Providing the Making a Difference Training via Zoom to groups of staff who do not have access to computers e.g. Estates, Transport etc. has increased numbers of staff who can now access the training.

## **Public Access to Information and Services (Model Equality Scheme Chapter 6)**

**26 Please list any examples of where monitoring during 2020-21, across all functions, has resulted in action and improvement in relation to access to information and services:**

The Trust is committed to ensuring everyone is given equal access to information about services in a format they can understand. The Trust provides interpreting services on request to help patients and clients and staff to communicate when using services.

Covid-19 meant that the demand for telephone interpreting, via BigWord Interpreting Service, increased. The monitoring of interpreting usage ensures the Trust can provide its information in the main languages. It also ensures that the appropriate type of interpreting is used for appointments. For simple, straightforward and short appointments, telephone interpreting is the most appropriate and most cost effective. Face to face interpreters are then available for more complex or sensitive appointments

Face to face Interpreters are provided and funded regionally through the Northern Ireland Health and Social Care Interpreting Service (NIHSCIS). Interpreters are professionally trained and adhere to a Terms of Engagement. Interpreters are bound by confidentiality and provide their services on a 24/7 basis. Following a register update, NIHSCIS now has 342 Interpreters registered in 35 different languages.

### **During 2020/21 the Interpreting Service:**

- Processed 60,550 requests
- Achieved 99.12% provision rate
- Provided for 2,234 video calls
- Operated from home providing business as usual services throughout

In March 2020 the Interpreting Service Customer Survey had 227 responses with 97% of HSC Staff and Practitioners surveyed rated the overall service received as 'very good' or 'good'.

The Trust has a service level agreement with Hands that Talk for provision of sign language interpreting.

Uptake of sign language interpreting is monitored throughout the Trust, refer to Appendix 4 for details.

Quarterly Screening Reports are drafted and issued

## Complaints (Model Equality Scheme Chapter 8)

**27** How many complaints **in relation to the Equality Scheme** have been received during 2020-21?

Insert number here:

Please provide any details of each complaint raised and outcome:

N/A

## Section 3: Looking Forward

**28** Please indicate when the Equality Scheme is due for review:

The current Equality Scheme runs from 2018-2023, however, it can be reviewed as and when required.

**29** Are there areas of the Equality Scheme arrangements (screening/consultation/training) your organisation anticipates will be focused upon in the next reporting period? (*please provide details*)

On 11<sup>th</sup> March 2020, the World Health Organisation officially declared COVID-19 a pandemic due to the speed and scale of transmission of the virus. As a result the Trust concentrated on delivery of essential services only in order to maximize the number of staff and resources available to respond to emerging needs/demands, safeguard lives and prevent the HSC system from becoming overwhelmed. The Trust has now started the process of rebuilding services in an incremental way while ensuring the delivery of high quality and safe patient/client services.

The Trust recognises that there are a number of policy leads/decision makers across HSC who likewise must comply with the S75 Equality Duties, the Human Rights Act and the Disability Duties in the development, implementation and review of the Minister for Health's "Strategic Framework for Rebuilding HSC Services" in NI and in the development and implementation of HSC Trusts Rebuild Plans. The Trust therefore commits to collaborate, as necessary, with all relevant HSC organisations in seeking to ensure the fulfilment of these statutory duties. This may entail, in some instances, the Trust feeding upward into regional EQIAs led by other HSC Policy Leads e.g. DoH, HSCB et al, contributing to equality screenings by other policy leads where there are for example regional themes, undertaking further individual equality screenings on Trust proposals and where necessary and appropriate conducting EQIAs and associated consultation in line with the commitments in approved Equality Schemes and in the fulfilment of the requirement of the DoH Circular Guidance 'Change of Withdrawal of Services – Guidance on Roles and Responsibilities' – September 2019 especially where temporary changes are being proposed as permanent.

Priority areas during 2021/22 include:

- As part of ongoing work through the Joint Forum with the other Trusts and the Equality Commission, the Human Rights Commission has agreed in their business plan to design and deliver a regional human rights training session to

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- Health and Social Trusts on residential care for vulnerable adults. (March 2022)
- The Trust will continue to respond to legislative requirements arising from Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018 in partnership with Trust Communications.

**30** In relation to the advice and services that the Commission offers, what **equality and good relations priorities** are anticipated over the next (2019-20) reporting period? (please tick any that apply)

- Employment
- Goods, facilities and services
- Legislative changes
- Organisational changes/ new functions
- Nothing specific, more of the same
- Other (please state):

Age Discrimination  
Shared Parental Leave  
Equality Screening Forms – new Two-tier forms  
Review of Part B of ECNI Reporting Template

## **PART B - Section 49A of the Disability Discrimination Act 1995 (as amended) and Disability Action Plans**

Please refer to appendix 2 which relates to compliance with our legislative duties under Section 49A of the Disability Discrimination Order (DDO): to promote positive attitudes towards disabled people and to encourage their full participation in public life. This corresponds to our Disability Action Plan (2018-2023) and what we have achieved in our third year 2020-2021.

The Western Trust remains committed to fulfilling our statutory duties and working towards best practice in all we do.

### **Attachments to this report:**

**Appendix 1:** Equality Action Plan Monitoring Report

**Appendix 2/Part B:** Disability Action Plan Monitoring Report

**Appendix 3:** WHSCT Local Equality and Disability Action Plan Monitoring Report

**Appendix 4:** WHSCT Interpreting Information 2020/21



**Western Health  
and Social Care Trust**

## **Appendix 1**

# **Regional Equality Action Plan**

## **Year 3 Progress Report**

**2020/2021**

# Equality Action Plan

## Section 1 – Ensuring the effective discharge of our Section 75 Equality Duties

We want to ensure that the focus is on outcomes for people within the nine Section 75 equality categories and to make a positive difference for them. The following actions are therefore aimed at simplifying the process.

Action Measure	Description
We will develop a Screening and Equality Impact Assessment (EQIA) Tool Kit to guide staff through the process.	<ul style="list-style-type: none"><li>• A regional toolkit will be available for policy and decision makers.</li><li>• More robust and regionally consistent screening/EQIAs.</li></ul>
<b>Progress Year 3 - Completed for this reporting period and ongoing</b>	
Following on from ECNI recommendations the Trust's current screening template is not in a fully accessible format – a new requirement for all published information. The Trust will give consideration to adopting the ECNI screening template to ensure ease of completion and maximum accessibility when published on the Trust website. We will provide on-line screening training for policy/service leads on new toolkit– to include S75 and Rural Needs.	
Action Measure	Description
We will develop a checklist to make sure Equality, Disability and Human Rights are at the heart of procurement.	<ul style="list-style-type: none"><li>• Checklist developed and adhered to by staff with responsibility for buying goods and services.</li><li>• Raised awareness among staff of equality and human rights obligations in procurement process.</li><li>• S75 and human rights issues identified at an early stage of procurement process.</li></ul>
<b>Progress Year 3 – Ongoing - rollover year 4</b>	
A Flowchart has been drafted and shared with Finance in NIAS initially for comments. This will then be shared more widely for agreement across the region. Discussion has taken place in terms of integrating an agreed flowchart into procurement training. This action has not fully been achieved as a result of Covid 19 pressures and will be picked up in year 4.	
Action Measure	Description
We will review our staff training to ensure best practice is followed when screening and conducting EQIAs.	<ul style="list-style-type: none"><li>• Up to date training programme for all policy makers across health and social care will be made available to ensure best practice.</li><li>• Skilled staff, policy leads and decision makers.</li><li>• Consistent and effective approach in the training programme across</li></ul>

	<ul style="list-style-type: none"> <li>• all Trusts (targets to be set).</li> <li>• Effective compliance with the S75 Equality Duties.</li> </ul>
<b>Progress Year 3 – Ongoing Rollover Year 4</b>	
Given the current pandemic the decision has been made to stand down all face to face training. The online Making a Difference training is still available for staff and compliance continues to be monitored. Uptake of the training has increased during the reporting period. The Trust's Equality Team continues to provide policy leaders and decision makers across the Trust with specific advice and support on best practice in screening and EQIAs.	
As stated above we will provide on-line screening training for policy/service leads on new screening toolkit– to include S75 and Rural Needs.	
Action Measure	Description
We will develop and implement a communication strategy to ensure that stakeholders are aware of Trust Equality Units, their functions and how they can be engaged on equality and human rights issues.	<ul style="list-style-type: none"> <li>• Strategy in place to improve communication.</li> <li>• Raised awareness among S75 groups of Trust Equality Units and how they can be involved in and influence Trust equality agenda.</li> </ul>
<b>Progress Year 3 - Completed for this reporting period</b>	
HSC Trusts utilise a range of mediums to raise awareness of the roll and function of their respective Equality Teams. This includes ongoing media, social media, newsletters etc. including a commitment to host an annual show case event as a conduit to raise the profile of the Equality Units.	
During this reporting period, the annual Show Case event focused on the development of a regional good relations statement. During Good Relations Week (14 – 21 September 2020), the Northern Trust hosted a regional engagement event on behalf of all Trusts via Zoom to develop a coproduced visible, accessible and unequivocal Good Relations Statement for HSC organisations to promote positive relations between persons of different religious belief, political opinion or racial group. The event was well attended by individuals, representative groups and trade unions. The final co-produced statement will be issued throughout the Trust in poster format.	
The Equality Section of the Trust's website includes Annual Progress Report, Quarterly Screening Reports and Disability and Equality Action Plans. Communication and awareness raising also continues through social media including Facebook and Twitter as well as press coverage of events/initiatives etc. Frequent articles are also drafted for staff and published on the Trust Intranet. The Section 75 Annual Progress Report is also considered by Trust Board for approval, a further means of raising awareness and highlighting key achievements during the current reporting period.	

The Trust continues to raise awareness through established networks and user panels such as the Equality, Human Rights and Good Relations Joint Consultative Forum which facilitates ongoing communication and collaboration between the Equality and Human Rights Commissions and the Community Relations Council in order to optimise outcomes for Section 75 groups.

These partnerships ensure an effective network for on-going stakeholder involvement and co-production and provides an opportunity for stakeholders and their representatives to be involved in the developing and planning of services. HSC Trusts continue to support and value the networks that have already established and continue to work in partnership to ensure the most marginalised groups have a voice and are involved in HSC Trust work.

During the reporting period the implementation of the DoH Co-production guidelines has resulted in a network of service users and carers who are involved in Trust's PPI and co-production work. This includes service users and carers. Involvement can range from membership of a steering group or project team or by attending a workshop to provide feedback. Many members are now co-delivering training.

Action Measure	Description
We will work with the Department of Health and other relevant stakeholders to make sure we are prepared for the introduction of Age Discrimination Regulations.	<ul style="list-style-type: none"><li>One regional event to raise awareness of potential implications of the new legislation on health and social care provision.</li><li>Better understanding amongst staff on the implications of the legislation.</li></ul>
<b>Progress Year 3 - Rollover Year 4</b> Rolled forward as legislation not yet in place.	

## **Section 2 – Promoting Equality in our Services**

The following actions have been developed in response to what we have heard and are aimed at providing welcoming, person-centred and accessible services for everyone.

Action Measure	Description
We will review our equality training programme in collaboration with service users, carers and their advocates.	<ul style="list-style-type: none"><li>• Consistent staff training and awareness raising, co-produced and delivered, where appropriate, across health and social care.</li><li>• Raised awareness among staff of the best way to promote equality of opportunity for service users.</li><li>• Each Trust to identify a process to monitor e-learning.</li></ul>
<b>Progress Year 3 - Completed for this reporting period</b> <p>The regional Equality, Good Relations and Human Rights; Making a Difference eLearning programme is mandatory for all HSC Staff. Compliance is reported regularly within each HSC Trust utilising dedicated internal reporting mechanisms. Reports are drawn up per directorate and shared to influence how best to promote staff awareness of equality, good relations and human rights and ensure uptake of this training. Targeted action is taken as necessary to further ensure compliance. The latest training figures can be found in the 'Training Section' of this year's S75 Annual Progress Report. The Equality, Good Relations and Human Rights training manual is available online as a resource to complement the training and to act as an aide memoire for staff.</p> <p>We carried out a review of this training programme, which has resulted in a number of amendments including a revision of the content of the programme to acknowledge that same sex marriage is now legalised in NI. Regional guidance was reviewed and amended to help inform Trust Board members of their roles and responsibilities in respect of equality, good relations and human rights. "Promoting Equality, Good Relations and Human Rights in HSC – Guidance for Board Members 2020". This information will be distributed to Trust Board members during 2021/22.</p> <p>HSC Trust Equality Units continue to provide staff with information, training and resources to ensure that have the appropriate level of knowledge, expertise and skill to mainstream Section 75 duties. As detailed above we have co-developed a regional good relations statement with individuals, representative groups and trade unions. The final co-produced statement is displaying in offices and waiting areas.</p> <p>The Trust's Equality Team continues to provide staff with information, training and resources to ensure that have the appropriate level of knowledge, expertise and skill to mainstream Section 75 duties.</p>	

Action Measure	Description
We will work with service users, carers and representative organisations to ensure Trust websites are accessible, user friendly and easy to navigate.	<ul style="list-style-type: none"> <li>User friendly HSC websites containing up to date information.</li> <li>Better communication with service users, carers and the public on access to our websites information.</li> </ul>
<b>Progress Year 3 - Completed for this reporting period</b>	
Website accessibility regulations came into force on 23 September 2018. The regulations mean that public sector bodies now have a legal obligation to meet accessibility requirements for their websites. To check how well the public sector is meeting the requirements, the Government Digital Service monitored a sample of public sector websites. The Trust's Communications Department carried out an internal audit of the Western Trust external website in 2020 in accordance with Web Content Accessibility Guidelines version 2.1 AA as per the Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018.	
The Trust's website is now partially compliant with the <a href="#">Web Content Accessibility Guidelines version 2.1 AA</a> standard, with non-compliances listed on the website's <a href="#">Accessibility Statement</a> .	
Content shared on the Trust's social media channels is now more digitally accessible where possible including all video content having native subtitles included.	
Action Measure	Description
We will work in partnership with LGBT representative organisations to develop guidance for health and social care staff to ensure LGBT service users have access to services.	<ul style="list-style-type: none"> <li>Consistent up to date staff guidance developed in partnership with LGBT organisations.</li> <li>Enhanced awareness of access barriers for LGBT service users and carers.</li> <li>Improved satisfaction with health and social care services for LGBT service users and carers.</li> </ul>
<b>Progress Year 3 - Completed for this reporting period</b>	
Work is underway with the HSC Trusts, Rainbow Project and Transgender NI and Trade Union colleagues to co-develop guidance for health and social care staff to ensure LGBT service users have access to services. This will be informed by a webinar/lunchtime engagement session facilitated by the Chair of Regional HSC LGBT Network with a presentation from Transgender NI and Belfast Trust staff from the Trans community to discuss their experience in the workplace. This guidance will cover good practice, etiquette, use of pronouns, and responsive service provision and employment. It is anticipated that this will be formally launched during Pride Week 2021.	

Action Measure	Description
We will work in partnership with Black and Minority Ethnic (BME) groups and groups representing BME older people to develop guidance for health and social care staff on meeting the needs of older people in BME communities and ensure access to services.	<ul style="list-style-type: none"> <li>• Staff guidance co-produced with BME communities and representative organisations.</li> <li>• Raised profile of needs of BME older people.</li> <li>• Increased awareness among staff of the needs of BME older people.</li> <li>• Improved access to services for BME older people.</li> </ul>
<b>Progress Year 3 – Completed for the reporting period</b>	
The Trust has worked with the Public Health Agency to provide translated public health materials related to Covid 19, including infection control and information about the vaccine. This included a number of interviews, shared on social media, of clinicians speaking in their native language to promote uptake of the Covid19 vaccine.	
The Trust is committed to maintaining a safe and positive working environment for BAME (Black Asian Minority Ethnic) staff and the elimination of racial discrimination for employees and patients. In Summer 2020, the Trust established a Black, Asian and Minority Ethnic Task Group to identify ways in which the Trust can actively meet this commitment working in partnership with internal and external stakeholders.	
The Trust has taken proactive steps to reach out to our Ethnically Diverse staff, our former Chief Executive hosted two virtual meetings for Black, Asian and Minority Ethnic (BAME) Trust employees during week commencing 22 June 2020. The aim of the meetings was to listen to the concerns and feedback from our BAME staff on how they have felt supported as a Western Trust employee working through COVID-19. Themes from the meetings were summarised and a BAME Network, led by BAME staff and supported by Human Resources and Equality staff has been formed. The group recently changed their name to WHSCT Ethnically Diverse Staff Network (EDSN) and continue to actively recruit to the group.	
Action Measure	Description
We will work in partnership with older people's groups, including the Pensioner's Parliament, to develop guidance for HSC staff on meeting the needs of older people.	<ul style="list-style-type: none"> <li>• Staff guidance co-produced with groups representing older people.</li> <li>• Raised profile of needs of older people in the delivery of services.</li> <li>• Increased awareness among staff of the needs of older people.</li> <li>• Improved communication and access to services for older people.</li> </ul>
<b>Progress Year 3 – completed for the reporting period</b>	
Work continues on an integrated care system, which focuses on improving local population health outcomes, including the health outcomes of older people. Over the reporting period, much has been done to improve access to services for older people including:	

- The development of a regional HSC delirium pathway so that people with delirium receive the right care in the right place at the right time.
- A co-produced information leaflet ‘Recognising Delirium’ with service users to provide useful information for relatives to help them recognise the signs and symptoms of delirium and advise staff of any changes to their relative’s condition. The leaflet is included in a ‘Delirium Information Pack’ for patients and relatives in wards in Antrim and Causeway Hospitals.
- Support provided for people who were shielding – with other local statutory and community partners.
- The Trust developed an on line training programme on dementia and mental health for staff within the Trust, primary care, community and voluntary sector and nursing/residential homes. In addition, the service also organised two sleep training courses, one for trust staff and one for staff working in community groups and healthy living centres working with older adults.
- Co produced with people with dementia and their carers the trust’s dementia services directory, dementia carers guide and the dementia services page on the Trust website was updated and expanded. A number of new service leaflets were also produced.
- A mental health navigator for older people was recruited whose role is to provide a highly responsive, individualized information and signposting service to older people with mild/ moderate mental health problems. The service aims to reduce isolation and improve the mental health and social well-being of older people referred to or discharged from our service. In addition the mental health navigator works in partnership with community development organisations to understand and respond to the needs of older people
- Considerable work has been undertaken during this reporting period with regard to supporting carers. The Carers Support Team reviewed and updated the Carers Mailing List and at the end of the reporting year the Carers Support Team were in contact with 2,080 carers on the list. Those registered on the mailing list receive a regular Carers Newsletter. 1500 Carers are receiving weekly electronic information shots in addition to the Carers Newsletter. The team developed and delivered a programme of online health and wellbeing events via Zoom during lockdown and will continue to incorporate online events into the regular events programme. The team also coordinated the unpaid carers Covid 19 vaccination programme referring over 3,000 carers for vaccination.
- Our Acute Care at Home pilot project for Fermanagh and West Tyrone has been successfully launched in early 2021 to help make the ‘home’ the hub for delivering health and care for our elderly population.
- Establishment of close supportive working relationships with Care Home staff to facilitate meaningful contact between residents and their families and vaccination of all residents and staff across all care homes in the Western Trust area. This included the establishment of Rainbow rooms, workforce appeals to Trust staff to help cover shifts within Independent Care Homes who faced challenging circumstances.
- The Western Trust and lead partners Derry City and Strabane District Council, Public Health Agency and Community and Voluntary organisations worked together to promote the 3rd annual Positive Ageing Month throughout the Derry City and Strabane District Council area during the month of October 2020. Positive Ageing Month provided an opportunity to draw

<p>attention to groups and activities that exist for older people throughout the District. Positive Ageing month takes into consideration the 5 steps to wellbeing – Be Active, Connect, Take Notice, Give and Keep Learning.</p>	
<b>Action Measure</b>	<b>Description</b>
We will work with the Northern Ireland Human Rights Commission to develop a training programme on a human rights approach to dealing with complaints – building on work done by the Ombudsman's Office.	<ul style="list-style-type: none"> <li>• Training on a human rights based approach to complaints management delivered to all staff who deal with complaints.</li> <li>• Complaints resolution process that embeds human rights values and principles.</li> <li>• Improved satisfaction with health and social care complaints management process.</li> </ul>
<p>As a result of reviews HSC will focus this training on residential care for vulnerable people. HSC Trusts have engaged with the NIHRC to commission this training and it has committed the following in their business plan: Design and deliver a regional human rights training session in partnership with NI Health and Social Trusts on residential care for vulnerable adults. (2 sessions to be designed &amp; delivered by March 2022). The training will be based on case studies and lawyers in NIHRC will advise Trust staff on human rights considerations in delivery of care and decision-making.</p>	
<b>Action Measure</b>	<b>Description</b>
We will hold an annual event to showcase best practice in equality and diversity within the health and social care.	<ul style="list-style-type: none"> <li>• An annual Equality and Diversity event delivered.</li> <li>• Health and social care viewed as a sector that promotes equality and diversity.</li> <li>• Improved awareness of equality and diversity best practice models and shared across health and social care and beyond.</li> </ul>
<p><b>Progress Year 3 - Completed for this reporting period</b></p> <p>During Good Relations Week, 14 – 21 September 2020, the Northern Trust hosted a regional showcase event via Zoom on behalf of HSC Trusts to develop a coproduced visible, accessible and unequivocal Good Relations Statement for HSC organisations to promote positive relations between persons of different religious belief, political opinion or racial group. The event was well attended by individuals, representative groups and trade unions. The final co-produced statement will be issued, in poster format, to all departments within the Trust for display in offices and waiting areas.</p>	

## Section 3 – Supporting our Staff

The following actions help to promote equality of opportunity for our staff and support them to understand their responsibilities in valuing differences and advancing equality of opportunity to ensure an inclusive and welcoming environment.

Action Measure	Description
We will ensure compliance with any new legislation governing gender pay reporting and address any inequalities identified.	<ul style="list-style-type: none"><li>• Pay structure that ensures fairness and equity in pay and reward arrangements in line with any new legislation.</li></ul>
<b>Progress Year 3– Rollover Year 4</b> Legislation has yet to be enacted by the NI Assembly. Further developments in this area have been halted due to the pandemic and we await information on the enactment of legislation within NI.	
<b>Action Measure</b>	
We will work in collaboration with relevant stakeholders to extend the remit of our Employability Schemes to enhance employment opportunities for marginalised S75 groups.	<ul style="list-style-type: none"><li>• Scope in year 1 opportunities and availability for our employability schemes.</li><li>• Employability scheme available to other marginalised S75 groups.</li><li>• Improved employment opportunities for marginalised S75 groups.</li><li>• Access to employment is improved for marginalised S75 groups.</li></ul>
<b>Progress Year 3 – Rollover Year 4</b> Due to Covid-19 pressures and the priority to maintain essential service provision progress has been affected. The group plan to drive forward this work stream as soon as business activities resume and Trust working groups are given the go ahead to reconvene.	
<b>Action Measure</b>	
We will revise Equality, Human Rights and Disability guidelines for our Non-Executive Trust Board members.	Up to date guidelines in place for Non-Executive Directors. Increased awareness among Non-Executive Directors of statutory compliance and responsibilities.
<b>Progress Year 3 – Completed for this reporting period</b> Regional guidance was reviewed and amended to help inform Trust Board members of their roles and responsibilities in respect of equality, good relations and human rights. “Promoting Equality, Good Relations and Human Rights in HSC – Guidance for Board Members”.	

Action Measure	Description
We will review our harmonious working environment advice in light of any new findings and recommendations from the work conducted by the Commission on Flags, Identity, Culture and Traditions.	<ul style="list-style-type: none"> <li>Consistent regional approach to ensuring all health and social care environments are welcoming to everyone.</li> </ul>
<b>Progress Year 3 – Roll over to year 4</b> The Commission's report has not yet been published. HSC Good Relations statement poster will be shared for display across facilities.	
Action Measure	Description
We will launch our new E-Learning Module and Equality and Diversity Staff Training Manual.	<ul style="list-style-type: none"> <li>20 minute E-Learning Training Programme for staff and managers and Equality and Diversity Staff Training Manual launched and available for all health and social care staff.</li> <li>Marketing strategy to increase uptake of training across all Trusts.</li> <li>Improved access to training for staff who do not have access to a computer through provision of the Staff Training Manual.</li> <li>Improved uptake of equality training, each Trust to set targets.</li> </ul>
<b>Progress Year 3 – Completed for this reporting period</b> The Trust continues to monitor compliance of mandatory Making a Difference, Equality, Good Relations and Human Rights eLearning training. The main body of the Annual Progress Report provides uptake during the reporting period. A review of this programme was undertaken, during the current reporting report and amendments made such as legalisation of same sex marriage and inclusion of HSC Trust values on the landing page.	
Action Measure	Description
We will work with relevant organisations and Trade Unions to develop best practice in supporting our staff who are victims of Domestic Violence/Abuse.	<ul style="list-style-type: none"> <li>Best practice model established in each Trust with support mechanisms for staff experiencing Domestic Violence/Abuse.</li> <li>Improved support for staff who are victims of Domestic Violence/Abuse.</li> <li>Raised awareness among staff of the best way to support colleagues who are victims of Domestic Violence/Abuse.</li> </ul>
<b>Progress Year 3 - Rollover to year 4</b> Regional meetings have been conducted with all Trusts with a view to adopting a similar policy and approach to ensure consistency and equality of opportunity for all HSC staff, who may be experiencing domestic and/or sexual abuse or violence. The Trust leads for the support service for staff also shared their learning and experience in a roundtable discussion with stakeholders across England, Scotland, Wales and Northern Ireland, which was convened by the Home Office. In year 4 HSC Trusts will convene a regional event	

specifically in regard to domestic and sexual abuse and raising awareness and promoting good practice.

Action Measure	Description
We will make sure that our staff who are carers are supported in the workplace so that they can continue with their caring role.	<ul style="list-style-type: none"> <li>• Consistent regional approach established to support carers in our workforce.</li> <li>• Improved support for staff who are carers.</li> <li>• Raised awareness among staff of the best way to support staff who are carers.</li> <li>• To pilot digital resources for carers and 'jointly app' carers app in Northern Trust area with learning disseminated regionally Year 3.</li> </ul>

#### **Progress Year 3 - Completed for this reporting period**

The Northern Trust Carer Hub, launched on Carers Rights Day, November 2019, is a central point of contact for carers and staff for signposting and support. This includes working carers. The Northern Health and Social Care Trust supports working carers, and is an active member of Carers UK's business forum, Employers for Carers. We as an organisation recognise that support needs are different for everyone and this can be particularly true for working carers who try to juggle varying work patterns with their caring role.

The Carer Hub responded quickly to the Covid 19 pandemic to make sure that carers were supported and there was someone at the end of the phone. The Hub sent carers information on public health guidance, hospital and care home visiting, PPE and deliveries available from local shops. Carer ID cards were issued to assist with priority shopping and the Carer Hub facilitated the carer vaccination programme. Support is also provided through sharing information that is relevant to carers in their caring role whether that be general information specific to the nature of caring, condition specific information or information regarding relevant departmental changes.

Our Carer Support Programme is based on the Take 5 Steps to Wellbeing. The Carer Hub was responsive during this pandemic and quickly adapted the programme to be delivered online offering classes such as Mindfulness, Pilates, relaxation workshops, creative workshops and information sessions. Our classes encourage connection with other carers which can often lead to peer support and prevent isolation.

The Trust has maintained good links with community and voluntary sector partners to provide essential support to family carers in each locality. This has included any older or vulnerable carers referred to the Community Navigators who have arranged shopping to be delivered and meals to be arranged. Carers may also be signposted to community & voluntary organisations who can offer psychological support, support relating to carers rights and entitlements, or condition specific support relevant to the person they are caring for. We may also signpost carers to relevant Trust staff who could help further.

During 2020/21 there were over 23,000 contacts with carers whether by email or by telephone and over 10,000 mail outs of information. 2,000 carers were sent a Carer ID Card which facilitated priority access to shopping and travel. 3,623 carers have been

provided with the Staff Booking Line number to book their vaccine and over 900 carers, many new to us, have attended our online support programme.

The designated carers website for Northern Trust [www.carersdigital.org](http://www.carersdigital.org) has been updated by Carers UK and now includes the following featured sections You and Your Wellbeing, Spotlight on Nutrition and Caring, About Me (building resilience) and Working and Skills e-learning for working carers. Any carer in Northern Trust can access the website by creating an account and Northern Trust remains the only Trust to offer this specific carer website.

A new section has been created on the Trust website Carer Hub called “Caring during COVID” this section highlights the latest Departmental advice documents, visitor and carer information.

Northern Trust is a member of ‘Employers for Carers’ which is a designated website designed to help our own members of staff who are also looking after or supporting a loved one with long term illness or disability.

<b>Total Actions in Year 3</b>	19	<b>Total Actions Completed in Year 3</b>	12	<b>Actions ongoing into Year 4</b>	7
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Western Health  
and Social Care Trust

**Appendix 2/Part B**

## **Appendix 2**

### **Regional Disability Action Plan**

### **Year 3 Progress Report**

**2020/2021**

# Disability Action Plan

## Section 1 – Promoting positive actions and increased participation through training, awareness and resources

Disabled people have told us that promoting well-informed social attitudes to disability is central to securing the right to equality for all disabled people. We are committed to providing training and resources to support our staff in the implementation of our disability duties.

### Actions to promote positive attitudes towards disabled people

Action Measure	Description
We will co-design and deliver bespoke disability equality training for frontline staff in partnership with disabled people.	<ul style="list-style-type: none"><li>• Consistent staff training and awareness raising, co-designed and delivered, where appropriate, across health and social care.</li><li>• Co-designed training programme in each Trust that includes specific guidance on communication on disability and autism.</li><li>• Increased staff awareness on disability equality and how to promote positive attitudes and participation in public life.</li><li>• Disability equality training that will reflect all disabilities (including hidden, autism, sensory) and will challenge negative stereotypes / attitudes about disabled people.</li></ul>
<b>Progress Year 3 – Complete for this reporting period and ongoing</b> The Making A Difference E-Learning mandatory training is the main training resource which all staff are required to complete. This incorporates disability awareness training and scenario based learning. In addition, HSC Trusts have revised the Staff Disability Etiquette Booklet which includes important information on Autism. This resource is aimed at raising staff awareness.  Work has been ongoing to coproduce training with disabled people. Progress is not as far advanced as originally intended due to Covid-19 pandemic and other priorities. A regional programme will be finalised incorporating input and involvement from people with disabilities and it is planned that this will be rolled out in Year 4. This will complement existing resources such as Making Communication Accessible for All and the Regional HSC Disability Toolkit.  During the reporting period the Trust held 3 sessions of online Disability Awareness Training, available to all staff throughout the Trust. The sessions were delivered by Employers for Disability NI.	

Action Measure	Description
We will work with the consortium of mental health organisations and the ECNI to ensure health and social care is signed up to the Mental Health Charter.	<ul style="list-style-type: none"> <li>• Workplace that welcomes and supports staff with a mental health issue.</li> <li>• Development of best practice models that ensure services are accessible to people with a mental health issue.</li> <li>• Availability of long-term sustainable information and training support that will help managers to identify and offer help and support to staff with a mental health issue.</li> </ul>
<b>Progress Year 3 - Completed for this reporting period and ongoing</b>	
All Trusts are signed up to the Mental Health Charter in collaboration with the Equality Commission for NI. The Charter commitments are currently being mainstreamed in the outworking of the Trust's Health, Well-Being and Inclusion Strategy.	
The Trust promotes and supports the mental health and wellbeing of staff and during the outbreak of Covid 19, many resources to support mental health and wellbeing have been disseminated including individual and team psychological support sessions. Staff across a range of service areas including Human Resources, Occupational Health, Psychology, Infection Control and Health Improvement, Equality and Involvement Team have worked collaboratively to pool their expertise and resources to draw together a comprehensive package of practical support for our staff.	
Action Measure	Description
We will continue to support the implementation of the Regional Physical and Sensory Disability Strategy.	<ul style="list-style-type: none"> <li>• Promotion of regional sensory awareness e-learning programme.</li> <li>• Improve awareness among staff on how to ensure people with sensory impairment have access to information, services and supports.</li> </ul>
<b>Progress Year 3 - Rollover to year 4</b>	
The Physical and Sensory Disability Strategy is led by HSCB and it has been agreed that the work on the Regional Accessible Information Standard should also be led by a regional organisation rather than a Trust. The HSCB has engaged with DoH and PHA on how this can be taken forward. The Trusts will continue to be involved in this work given the commitment made in their respective Disability Action Plans. It is important to note that this will continue to be a priority piece of work, particularly highlighted by the importance of providing clear accessible information as we continue to deal with the pandemic, rebuild HSC services and roll out the Encompass project.	

## **Actions to encourage participation by disabled people in public life**

Action Measure	Description
We will develop for staff a welcome pack with information about accessibility such as: <ul style="list-style-type: none"> <li>• arrangements for sign language interpreting</li> <li>• provision of auxiliary aids</li> <li>• disability etiquette</li> <li>• alternative formats.</li> </ul>	<ul style="list-style-type: none"> <li>• Accessibility welcome pack available for all disabled service users to improve access to services.</li> <li>• Improved service user and carer experience.</li> <li>• Resource available for staff to support them to meet the needs of disabled service users and carers.</li> </ul>

### **Progress Year 3 – Rollover to year 4**

A new remote sign language interpreting service has been set up, primarily to ensure that our service users have access to health and social care appointments during the pandemic. The service user can download an app to access a free online remote sign language interpreter 24/7. The service user can use this service to contact the NHS111 Northern Ireland COVID19 Helpline, NI COVID19 Community Helpline, GP surgeries, hospitals, dentists, social care services etc. Information on the new service was published on our social media and disseminated through our established networks. The Trust Sensory Support Team also shared details with Service Users.

In March/April when the pandemic first hit we were provided with a wealth of vital information about how to stay safe. Information about the Coronavirus, guidance on staying home and social distancing along with information about the vaccine process was just some of the information we received and shared with our networks. This information was translated into various languages, put into easy read and provided in alternative formats. This information was made available on the Trust website and shared regionally.

Action Measure	Description
We will work with relevant organisations to adopt a communication standard in line with the Accessible Communication Standard in England to ensure information is accessible for all disabled people including those with autism and those with communication disability.	<ul style="list-style-type: none"> <li>• Establishment of a consistent communication standard across all Trusts.</li> <li>• Improved communication with service users and carers.</li> <li>• Improved experience for people using our services.</li> <li>• Improved accessibility to information and services.</li> </ul>

### **Progress Year 3 - Rollover to year 4**

The Physical and Sensory Disability Strategy is led by HSCB and it has been agreed that the work on the Regional Accessible Information Standard should also be led by a regional organisation rather than a Trust. The HSCB has engaged with DoH and PHA on how this can be taken forward. The Trusts will of course continue to be involved in this work given the commitment made in their respective Disability Action Plans. It is important to note that this will continue to be a priority piece of work, particularly highlighted by

the importance of providing clear accessible information as we continue to deal with the pandemic, rebuild HSC services and roll out the Encompass project.

## **Section 2 – Supporting full participation of disabled people by improving accessibility**

We have done much work over the years in enhancing the accessibility of health and social care services but disabled people continue to tell us that barriers to full accessibility remain. We are committed to working with disabled people on the initiatives listed below to improve accessibility for and participation of disabled people when accessing our buildings, information and services.

### **Actions to promote positive attitudes towards disabled people**

Action Measure	Description
We will work with disabled people to make sure we are ready for the introduction of new legislation including: <ul style="list-style-type: none"><li>• Mental Capacity</li><li>• Age Discrimination (Goods/Facilities/Services)</li></ul>	<ul style="list-style-type: none"><li>• Actions plans available to ensure readiness for forthcoming legislation</li></ul>
<b>Progress Year 3 - Completed for this reporting period and ongoing</b>	
The Mental Capacity Act (NI) 2016 ('the Act') is a piece of legislation which, when fully implemented, will bring together mental capacity and mental health law for those aged 16 years and over within a single piece of legislation. The Deprivation of Liberty Safeguards as set out in the Mental Capacity Act (Northern Ireland) 2016 (MCA) will become law on 31 May 2021, following an extension, in November 2020 by the Department of Health.  The Act provides a statutory framework for people who lack capacity to make a decision and people who now have capacity but wish to make preparations for a time in the future when they lack capacity. Where a person who lacks capacity is being deprived of their liberty, the Deprivation of Liberty Safeguards must be applied.	
This new law states that the Trust must make sure that everyone who is currently deprived of their liberty has been reviewed and safeguards have been put in place by a special Trust Panel known as a Trust Authorisation Panel which can authorise a deprivation of liberty. The Panel is made up of three senior professionals including those with a medical and social work background.	
The MCA Implementation Team ensures that training is made available to Trust staff to assist with their understanding of their responsibilities and roles within the legislation and to develop and support the processes required for the implementation of the	

legislative requirements. Additional support is provided through managers' workshops, staff support sessions and bespoke training for those impacted by the MCA legislation.

The Department of Health has recently issued guidance to staff to support ongoing challenges in implementing the requirements under the Act ensuring that emergency provisions provide staff with protection from liability if they take all reasonable steps to implement the additional safeguards as soon as practically possible.

Action Measure	Description
We will review how we communicate with and seek feedback from disabled people (staff and service users) about health and social care and develop guidance to ensure effective engagement in the future	<p>Introduction of new methods of seeking feedback and communication identified such as Citizen Space.</p> <ul style="list-style-type: none"><li>• Use of all available media (including social media) considered.</li><li>• Guidance available for staff to ensure effective engagement with disabled people.</li><li>• Improved development of policy and practice by drawing on wide range of views and experiences.</li></ul>

#### **Progress Year 3 - Completed for this reporting period and ongoing**

The Trust is committed to the principles of the [Co-Production-Guide.pdf](#). This guide illustrates the commitment to a system that partners and organises health and wellbeing with people, for people, and by people, including people with a disability and representative organisations. Details of the extensive work carried out can be found in our PPI and Co-production Annual Report.

Care Opinion was introduced within the Trust on 3 August 2020, is an independent non-profit feedback platform for HSC, supported by the Department of Health and implemented by the Public Health Agency (PHA). It enables service users and their families, anonymously, to give real time feedback on their Health and Social Care received and share their stories with others in a safe and simple manner. To make the system more accessible there are a number of options people can choose e.g. British and Irish Sign language, ability to change font sizes and contrasts for anyone with visual impairment. A wide selection of languages are also accessible. For those with sensory or communication difficulties there is also the opportunity to use pictures, i.e. Talking mats to share their experiences. Those submitting stories are also requested to complete Equality Information e.g. their gender, age, whether they have a disability etc.

Managers and designated responders within the Trust are able to respond directly using the platform. During the COVID 19 pandemic, Zoom training sessions for responders were coordinated by the Trust Patient Client Experience facilitator and Care Opinion Team based in Sheffield.

Website accessibility regulations came into force on 23 September 2018. The regulations mean that public sector bodies now have a legal obligation to meet accessibility requirements for their websites. To check how well the public sector is meeting the requirements,

the Government Digital Service monitored a sample of public sector websites. The Trust's Communications Department carried out an internal audit of the Western Trust external website in 2020 in accordance with Web Content Accessibility Guidelines version 2.1 AA as per the Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018.

The Trust's website is now partially compliant with the [Web Content Accessibility Guidelines version 2.1 AA](#) standard, with non-compliances listed on the website's [Accessibility Statement](#).

Content shared on the Trust's social media channels is now more digitally accessible where possible including all video content having native subtitles included.

## **Actions to encourage participation by disabled people in public life**

Action Measure	Description
We will work with representative groups to develop an accessibility checklist to ensure that health and social care facilities are considered accessible spaces for all.	<ul style="list-style-type: none"><li>• Accessibility checklist for health and social care facilities developed in partnership with ECNI and voluntary and community sector.</li><li>• Health and social care facilities accessible for service users and carers.</li><li>• Information from checklist to support prioritisation of programme of accessibility works.</li><li>• Resource developed to promote best practice in the built environment including autism friendly spaces.</li><li>• Promotion of best practice when working with colleagues on modernisation projects or new builds.</li><li>• Guidance available on autism friendly spaces. Promote principles of autism friendly spaces and services.</li></ul>

### **Progress Year 3 – Completed for this reporting period and ongoing**

Using an adapted version of the ECNI accessibility audit tool it is hoped that a range of changes will be implemented and developed using an 'Access Checklist' to ensure physical environments are more accessible. Learning will be shared across the Trust and regionally.

The Northern Trust, in partnership with the Trust's Disability Consultation Panel, has commenced as a pilot project for the region to invest in the creation of access guides for Antrim Area Hospital and Causeway Hospital. The guides will describe each patient journey and give disabled people, carers and those with long term health conditions the information required to plan their visit.

AccessAble, a third party provider, was appointed in March 2020 to survey and document all aspects of accessibility at the two hospital sites. The detailed guides will be available to access by website and as a mobile application and will be offered in a wide range of accessible formats. Other Trusts, via their Estates Departments are giving consideration to the service.

Action Measure	Description
We will work to ensure access to all forms of communication support including support for BSL/ISL users, Makaton users and people who have Autism Spectrum Disorder.	<ul style="list-style-type: none"> <li>• Regional services established for the provision of communication support for people who are deaf or hard of hearing.</li> <li>• Health and social care communication accessible to all service users and carers.</li> <li>• Improved access to services.</li> <li>• Improved communication with service users and carers.</li> <li>• Improved experience for people using our services.</li> </ul>

#### **Progress Year 3 – Rollover year 4**

In 2013 the Health and Social Care Board (HSCB) initiated a regional review of the provision of Communication Support Services in Northern Ireland to determine the most appropriate arrangements for providing the service in the future. The review concluded in January 2016 and proposed that communication support services should be supplied in future on the basis of a regional shared service provided by the Business Services Organisation. In June 2016 a consultation on the recommendations from the regional review of communication support services for people who are deaf or hard of hearing across Northern Ireland was launched. The public consultation supported the recommendation that the Business Services Organisation would be commissioned to supply Regional Communication Support Services (RCSS) for deaf and hard of hearing people who need to access to health and social care across Northern Ireland. The RCSS service development has been driven by the need to improve the accessibility, quality and safety of current communication support to service users as intended by RQIA in its Recommendation in 2011. The RCSS Service Delivery Model has been developed based on the recommendations from the review of communication support in 2016. Over the reporting period, meetings have been held with sign language service users and a range of organisations and individuals across all HSC Trust areas, providing an opportunity to discuss the service model. Work on developing the model continues.

A new remote sign language interpreting service has been set up, primarily to ensure that our service users have access to health and social care appointments during the pandemic. The service user can download an app to access a free online remote sign language interpreter 24/7. The service user can use this service to contact the NHS111 Northern Ireland COVID19 Helpline, NI COVID19 Community Helpline, GP surgeries, hospitals, dentists, social care services etc. Information on this new service was published on our social media and disseminated through our established networks. We also wrote out to service users who had previously booked a sign language interpreter through our services.

Website accessibility regulations came into force on 23 September 2018. The regulations mean that public sector bodies now have a

legal obligation to meet accessibility requirements for their websites. To check how well the public sector is meeting the requirements, the Government Digital Service monitored a sample of public sector websites. The Trust's Communications Department carried out an internal audit of the Western Trust external website in 2020 in accordance with Web Content Accessibility Guidelines version 2.1 AA as per the Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018.

The Trust's website is now partially compliant with the [Web Content Accessibility Guidelines version 2.1 AA](#) standard, with non-compliances listed on the website's [Accessibility Statement](#).

Content shared on the Trust's social media channels is now more digitally accessible where possible including all video content having native subtitles included.

Action Measure	Description
We will join the Equality Commission's 'Every Customer Counts' initiative to try and ensure that services and the physical environment are accessible.	<ul style="list-style-type: none"><li>• Public commitment to 'Every Customer Counts' and formal sign up by all Trusts being a campaign signatory.</li><li>• Health and social care services accessible and open to all potential service users and carers. Raised awareness of three good practice guides to illustrate reasonable adjustments which have been made by various service providers in a range of sectors.</li></ul>

#### **Progress Year 3 – Completed for this reporting period**

Every Customer Counts is an initiative developed by the Equality Commission to help organisations to make their services more accessible and inclusive to all our service users, patients, visitors and carers. The aims are closely linked to HSC Trusts regional values.

A regional workshop was held during the year under review. Attendees included Section 75 Equality Leads, a representative from AccessAble UK and Estates officers from each HSC Trust. The Equality Commission have developed a [self-audit tool](#) which the sub-group agreed could use to evaluate how accessible services are. The sub- group has had its initial meeting and are in consensus that it would be more appropriate and feasible to undertake this audit in a number of key areas in the first instance and then mainstream and roll out good practice across the other sites on an incremental basis.

Estates officers agreed to work collaboratively and in collaboration with AccessAble UK to identify a few pilot sites where work could commence on the introduction of Accessibility Guides to provide ease of access for patients, clients, visitors and staff. Progress on this initiative has been delayed due to Covid.

## **Section 3 – Supporting full participation of disabled people in our workforce**

We know that there continues to be gaps between the proportion of disabled people employed in health and social care compared with non-disabled people. We are committed to ensuring that disabled people are afforded equality of opportunity in respect of entering and continuing employment in health and social care. We will work in partnership with disabled people to make sure our employment policies and practices and working environments are as inclusive and accessible as possible. Please note the nature of the actions detailed below will relate directly to participation by disabled people in public life.

Action Measure	Description
We will work in partnership with Recruitment Shared Services to promote a review of recruitment and selection processes to promote equality and ensure any barriers that may discourage a disabled person from applying are identified and mitigated action as appropriate.	<ul style="list-style-type: none"><li>• Barriers to recruitment and selection process improved.</li><li>• Best practice model developed in relation to online recruitment.</li><li>• Increased applications from people with a disability.</li></ul>

**Progress Year 3 – Completed for this reporting period**

The Health and Social Care Workforce Strategy 2026: Delivering for Our People sets out ambitious goals for a workforce that will match the requirements of a transformed health and social care system. It also addresses the need to tackle serious challenges with supply, recruitment and retention of staff. The Strategy document includes a very detailed look at the workforce issues and challenges facing health and social care in Northern Ireland.

Theme 1 in the Strategy is about Attracting, Recruiting and Retaining and includes the commitment to set up and roll out a regional HSC careers service to help ensure a good supply of people in the future; to inform and excite people on the range of jobs and professions and to publicise health and social care as a career option.

Trusts have been working collaboratively to improve access for those seeking employment with the Trusts. Examples include:

- Improvements in website accessibility – providing greater ease of access for job applicants.
- Production of a series of recruitment - How to Guides.
- Outreach measures – regional and local career events to promote the HSC as an employer of choice.

The new Disability Equality Policy and Reasonable Adjustment Toolkit was agreed regionally with Trade Union partners and introduced within each Trust in 2021. This resource was informed with input from the Disability Sector, ECNI, managers and staff across HSC as well as Equality practitioners. The Tool Kit provides very practical advice for both managers and staff when managing disability in the work place and will be used across the region as a resource to aid best practice and understanding of the out

workings of the Disability Discrimination Act 1995.

Action Measure	Description
We will work with staff, schools and disability organisations to promote health and social care as a disability friendly employer.	<ul style="list-style-type: none"><li>• Development of our work placements and employability programmes</li><li>• Improved awareness of the Trust as a disability friendly employer through increased work placements and promotion at careers conventions</li></ul>

#### **Progress Year 3 – Rollover year 4**

Due to Covid-19 pressures and the priority to maintain essential service provision progress has been affected. We will further consider this work stream as soon as business activities resume and Trust working groups can reconvene.

Action Measure	Description
We will review opportunities for staff to disclose their disability.	<ul style="list-style-type: none"><li>• Staff encouraged to declare that they have a disability.</li><li>• Promotion of the benefits of disclosure and importance of monitoring.</li><li>• Increased awareness of the importance of staff keeping personal equality monitoring records up to date (via HRPTS).</li><li>• Increased staff disclosure and staff supported.</li><li>• Robust equality monitoring statistics to ensure meaningful analysis to support decision making and benchmark workforce profile.</li></ul>

#### **Progress Year 3 – Completed**

A staff information booklet entitled 'Should I Disclose to My Employer that I have a Disability' has now been produced setting out the benefits of disclosure. Whilst disclosure is voluntary there are clear benefits for an employee in being open and transparent about their disability status. Firstly, it enables an employer, in this instance HSC Trusts, to provide for timely and practical implementation of reasonable adjustment in the workplace for new or existing employees with a disability. This is particularly important where there are health and safety considerations. This staff information booklet draws on best practice advice provided by Disability Action. This booklet has now been launched alongside the Trust's disability Equality Policy and Reasonable Adjustment Toolkit.

Action Measure	Description
We will work in partnership with disabled people and Occupational Health Services to ensure that disabled people are supported to continue in employment.	<ul style="list-style-type: none"> <li>Promotion of revised best practice guidance on employing persons with a disability.</li> <li>Development and delivery of bespoke equality and human rights training to Occupational Health staff.</li> <li>Awareness campaign to highlight the benefits of referral to Occupational Health - for staff and for managers.</li> <li>Improved support for disabled staff.</li> <li>More robust reasonable adjustment process.</li> </ul>
<b>Progress Year 3 – Completed and ongoing</b>	
The new Disability Tool Kit includes a complete section on Reasonable Adjustments in the Workplace to ensure managers fully understand their legal responsibilities under the Disability Discrimination Act 1995.	
Promotion of the role of Occupational Health in helping to identify and support staff and managers implement reasonable adjustments.	
Unfortunately, due to Covid pressures, which have significantly affected Occupational Health resources, some of the actions have had to be deferred.	
Action Measure	Description
We will develop guidance on supporting people with autism in employment in partnership with representative organisations.	<ul style="list-style-type: none"> <li>Co-designed guidance produced which will raise awareness among staff of reasonable adjustments for people with autism.</li> <li>Promotion of guidance across health and social care.</li> </ul>
<b>Progress Year 3 – Rollover year 4</b>	
A regional Staff information Booklet completed and when approved regionally will be adopted by HSC Trusts. This resource provides practical advice for managers and staff re managing Autism in the Workplace.	

Total Actions in Year 3	15	Total Actions Completed in Year 3	9	Actions ongoing into Year 4	6
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Western Health  
and Social Care Trust

## **Local Equality and Disability**

### **Action Plan**

### **2018 – 2023**

## **Year 3 Progress Report**

### **2020/2021**

The WHSCT Local Actions were developed as a result of the Trust's Pre-Consultation event held on 20 January 2017. These action measures are designed to be flexible, adaptable and responsive to changing circumstances and needs and will be reviewed on an ongoing basis and annually via the Trust's Annual Equality Progress Report to the Equality Commission for Northern Ireland.

## Section 1 – Ensuring the effective discharge of our Section 75 Equality Duties

We want to ensure that the focus is on outcomes for people within the nine Section 75 equality categories and to make a positive difference for them. The following actions are therefore aimed at simplifying the process.

Action Measure (1)	Description
Trust Directorates to work in partnership with RNIB and Action on Hearing Loss to develop models of good practice. Roll out learning to other service areas	<ul style="list-style-type: none"><li>• Improved communication in suitable formats to meet the needs of people with a visual/hearing impairment using services.</li><li>• Improved patient satisfaction with communications from the Trust.</li></ul>
<b>Progress Year 1</b>	
Making Communication Accessible for all issued to staff and available via intranet. Currently able to record on PAS if a patient has communication support needs. Outpatient reform manager has been working with GP practices to ensure information is communicated to the Trust re communication support needs of patients they refer. The Lead is working with the GP Lead for Clinical Communication Gateway System (CCG) on enhancing the current referral form from GP Practices to Secondary Care. The CCG is linked to the GP system and creates the referral to Acute services. It is hoped that on the referral form we will be able to add a 'drop down' which will allow GPs (throughout the region) to select options i.e. visually impaired etc. When received into Trusts, this will allow the Booking Teams to register this on the Trust Patient Administrative System (PAS).	
<b>Progress Year 2</b>	
The Western Trust Sensory Support Services Team launched a new booklet "Sensory Support Services" a guide to services offered across the Western Trust area in November 2019. The Team work with people of all ages from children to older people and have extensive experience and knowledge of deafness, visual loss, dual sensory loss, tinnitus and other related issues. The updated booklet will provide useful information and support available to individuals, families and carers of people with sensory loss.	
The Trust continues to provide information in alternative formats and provide training for staff including Visual Awareness Training, facilitated by Eye Care Liaison Officers from RNIB and Deaf Awareness Training facilitated by the British Deaf Association.	

In June 2016 [a consultation on the recommendations from the regional review of communication support services for people who are deaf or hard of hearing across Northern Ireland](#) was launched. The public consultation supported for the recommendation that the Business Services Organisation would be commissioned to supply Regional Communication Support Services (RCSS) for deaf and hard of hearing people who need to access to health and social care across Northern Ireland. The RCSS service development has been driven by the need to improve the accessibility, quality and safety of current communication support to service users as intended by RQIA in its Recommendation in 2011. The RCSS Service Delivery Model has been developed based on the recommendations from the review of communication support in 2016. Over the reporting period a number of meetings have been held with sign language service users and a range of organisations and individuals across all of the Trust areas, providing an opportunity to discuss the service model. Work on developing the model continues, the Trust is represented on this group by the Head of Services, Adult Mental Health and Disability Services.

### **Progress Year 3**

Training at all levels in the Trust has been significantly impacted by the Covid-19 pandemic with face-to-face training cancelled, unless essential, to ensure social distancing guidelines etc. are adhered to. Trust Staff are regularly advised of training available via frequent Trust Communications and team meetings and adhoc training is also delivered. Equality staff continue to liaise with RNIB staff and shared RNIB guidance re vaccine centres with relevant staff. Equality staff also liaised with RNIB to gather feedback on their experience when attending the Trust vaccine centres. This feedback was shared with vaccine centre managers. Equality Lead has liaised with RNIB re feedback on online Visual Awareness Training that they have developed. Discussions have taken place with British Deaf Association regarding provision of their Deaf Equality Awareness Training via online. Disability Awareness Training, provided via contract with Employers for Disability NI has moved online and 3 sessions were held during 2020/21 with 90 staff members attending.

### **Action to continue through lifespan of plan.**

Action Measure (2)	Description
Trust Directorates to work in partnership with key stakeholders and service users to develop models of good practice and undertake improvements in wayfinding in Trust facilities.	<ul style="list-style-type: none"><li>• Clearer, more effective information.</li><li>• Improved hospital/Trust facilities user satisfaction and reduced complaints.</li></ul>

### **Progress Year 1**

Work and improvements have taken place, including with Wayfinding within Altnagelvin Hospital. A wayfinding strategy was developed in response to key issues raised in survey responses regarding the need for clarity and consistency across the hospital site from pre-hospital information sent to service users ahead of a site visit to leaving facilities following their site visit. The document 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.

Service Users also worked closely with colleagues from Capital Development to review the proposed signage for the new North Wing that is under construction on the Altnagelvin site, currently to put forward suggestions for improvement to make it easily accessible for patients and clients using the hospital site.

The Western Patient Client Experience Lead worked with a visually impaired service user and RNIB to develop an information card for staff "See it Our Way". The card was designed in partnership by the Western Trust, PHA and RNIB and provides information for staff on how to help blind and partially sighted people when using health and social care services. A video clip was also uploaded to the Trust Social Media forums providing information on the contents of the card. The card was first launched on 27 March 2019 as part of a regional roadshow held within the Western Trust area, in partnership with #Hello my name is initiative.

### **Progress Year 2**

Visual Awareness Training, delivered by Eye Care Liaison Officers from RNIB and Deaf Awareness Training delivered by the British Deaf Association continues to be provided to Trust staff. The "See it Our Way" information card developed by Regional Patient Client Experience staff with a visually impaired service user and RNIB and launched on 27 March 2019 continues to be shared throughout the organisation, as is the accompanying video clip.

Projects which have completed during the 2019/20 reporting period have reflected the principles of the wayfinding strategy including phases of the new North Wing at Altnagelvin Hospital. In November 2019 a representative from the Estates Department attended a presentation on the Access Able system with representatives from other trusts. <https://www.accessable.co.uk/> is a website which has accessibility information for the public who can use the site to gain information to enable them to access services. The system would prepare a recommendations matrix and a best practice guidance report which could be used to help prioritise required accessibility improvement works.

The WHSCT will work with the other HSCNI trust's in 2020-2021 to look at the benefits of Access Able and how this might be taken forward within the Trust.

### **Progress Year 3**

Although opportunities for engagement were limited due to the covid-19 pandemic, the Trust continued to ensure information on the new North Wing facility at Altnagelvin was shared in a number of formats. A particular focus was on preparing for transfer of services to the new main entrance area, ensuring everyone who needed to access services could do so as easily and efficiently as possible. Any

business cases submitted for new developments continued to include initial screening assessments for sustainability, equality and human rights. Subject to approval and funding, Section 75 groups will be involved in the planning for and design of these facilities.

As a result of the current pandemic attendance at hospitals has greatly reduced as clinics are now delivered using a variety of mediums meaning that service users do not always have to attend for appointments etc. Visiting restrictions have meant there has been a reduction in members of the public/visitors attending Trust premises. Social distancing and Infection Prevention and Control measures have also resulted in some changes to access to areas within the Trust. These changes have been communicated to staff and service users throughout the reporting period.

**Action to continue through lifespan of plan.**

Action Measure (3)	Description
Trust Directorates to work in partnership with key stakeholder groups including Voluntary and Community sector staff and the public to review and improve letters, leaflets and booklets provided to patients.	<ul style="list-style-type: none"><li>• Clearer, more effective information.</li><li>• Improved hospital/Trust facilities user satisfaction and reduced complaints.</li></ul>

**Progress Year 1**

Directorates are encouraged to involve service users/carers etc. in the drawing up of information or reviewing of same.

Health Improvement and Equality and Involvement staff have established a Health Literacy group to issue information to staff on the need for plain English etc.

**Progress Year 2**

To support a common response to three Community plans (Derry City & Strabane District Council, Fermanagh & Omagh District Council and Causeway Coast and Glens Borough Council) the Western Health Literacy Delivery Partnership was formed in May 2019 with representation from WHSCT, PHA, NHSCT, CAWT, CDHN, DHC, BBHF, C&V Sector. Poor health literacy is linked to unhealthy behaviours and an increased risk of illness and early death and it has been highlighted as a priority in the Making Life Better framework and the Community Plans in the 3 Councils that span the Western Trust area, with an action to improve awareness and understanding of health literacy. A Terms of Reference was developed for the group and the objective is to work in partnership across the three council areas which span the Western Trust area to reduce the impact of health inequalities using a health literacy approach and maximising all available resources.

Subsequently, the Regional Health Literacy Forum was then convened and includes membership from all 5 Health Trusts, PHA, DoH,

HSCB, PCC, Belfast Healthy Cities and Community Development & Health Network. The forum is currently working to develop an action plan for a consistent approach to improve health literacy across the region.

### **Progress Year 3**

Opportunities for engagement were limited due to the covid-19 pandemic, the Trust continued to ensure information was shared in a number of formats using a variety of mediums. The Involvement team have established an internal leads forum, made up of staff with a responsibility for all things involvement throughout the Trust directorates. This mechanism will further push the PPI/Involvement agenda throughout directorates ensuring service users/carers are involved at all levels of service planning, delivery and evaluation.

Covid priorities have had an impact on the frequency of the Health Literacy Group meetings. It is expected the group will meet and address the action plan in the coming months. HIEI have recently explored the option of developing training, co-produced in partnership with Community Development Health Network (CDHN), to raise awareness of health literacy amongst health practitioners. In addition, they will aim to raise the capacity of our community, service users and carers around health literacy.

Website accessibility regulations came into force on 23 September 2018. The regulations mean that public sector bodies now have a legal obligation to meet accessibility requirements for their websites. To check how well the public sector is meeting the requirements, the Government Digital Service monitored a sample of public sector websites. The Trust's Communications Department carried out an internal audit of the Western Trust external website in 2020 in accordance with Web Content Accessibility Guidelines version 2.1 AA as per the Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018.

The Trust's website is now partially compliant with the [Web Content Accessibility Guidelines version 2.1 AA](#) standard, with non-compliances listed on the website's [Accessibility Statement](#). Content shared on the Trust's social media channels is now more digitally accessible where possible including all video content having native subtitles included.

### **Action to continue through lifespan of plan.**

## **Section 2 – Promoting Equality in our Services**

The following actions have been developed in response to what we have heard and are aimed at providing welcoming, person-centred and accessible services for everyone

Action Measure (4)	Description
Directorates to ensure that when they are delivering their services they work to support all Section 75 (S75) groups to encourage their participation.	Increased capacity of Directorates to identify low uptake by any of the equality groups and to develop actions that address this.

**Progress Year 1**

Work continues within Directorates to ensure uptake of services. ‘Encompass’ is a HSC-wide initiative that will introduce a digital integrated care record to Northern Ireland. Due to go live in summer 2021 it will support the HSCNI vision to transform health and social care in order to improve health outcomes and create better experiences for those receiving, using and delivering services. Many of the systems currently used in HSCNI are outdated and need to be replaced, most predate the Section 75 legislation and so cannot readily nor routinely capture Section 75 information. The new system should take account of the need to capture this information.

Trust Traveller project workers are working with travellers to develop a range of health improvement programmes, including women and men’s group, early years programmes and afterschool programmes.

**Progress Year 2**

Presentation on the culture/experiences of Travellers, followed by a question and answer session was facilitated by a member of the Travelling community at the request of staff from the Obstetrics & Gynaecology Dept, in Altnagelvin Hospital, 10 staff members attended this.

**Progress Year 3**

The Encompass Programme will introduce a digital integrated care record to Northern Ireland supporting the HSCNI vision to transform health and social care in order to improve health outcomes and create better experiences for those receiving, using and delivering services. The programme is supported by all five of the Health and Social Care Trusts, the Public Health Agency, BSO, the Health and Social Care Board, Northern Ireland Ambulance Service and the Department of Health and led by professionals from across HSCNI.

The Programme is working closely with the chosen supplier, Epic and HSCNI subject matter experts in preparation for build and design of a system that is fit for purpose in Northern Ireland. Readiness and working groups are being established and will include staff and service users to make decisions based on development and delivery of care plans, test results, medication records, communication and mobility needs and appointments – all needed to ensure the individual gets the best care. This will enhance and streamline

HSCNI records and systems by reducing duplication and unwarranted variation.

The Traveller Health and Wellbeing Programme aims to improve the health outcomes of Travellers across the Western Trust area. The programme sits within the Western Trust, Health Improvement, Equality and Involvement Department. Much of the core work of the programme was impacted by the Covid 19 restrictions. However the programme continued to engage with as many Travellers as possible, supporting them to access a wide range of services including Covid 19 supports provided by the local community/voluntary sectors.

The Western Traveller Action Group continued to meet via Zoom and although hampered, did make some progress. One of its key actions is to support the establishment of a Traveller led organisation and build meaningful Traveller participation. The first step involved obtaining the views of as many Travellers across the Western Trust area. Some 87 responses were received with 97% expressing support for the development of a Traveller led organisation. Following on from the survey two zoom meetings were held, all the Travellers who had indicated that they would like to get involved were invited. The meetings had limited success. The overall view was that there needed to be a face to face meeting which will be arranged when safe to do so.

The Trust has taken proactive steps to reach out to our Ethnically Diverse staff, our former Chief Executive hosted two virtual meetings for Black, Asian and Minority Ethnic (BAME) Trust employees during week commencing 22 June 2020. The aim of the meetings was to listen to the concerns and feedback from our BAME staff on how they have felt supported as a Western Trust employee working through COVID-19. Themes from the meetings were summarised and a BAME Network, led by BAME staff and supported by Human Resources and Equality staff has been formed. The group recently changed the name to WHSCT Ethnically Diverse Staff Network (EDSN) and are actively recruiting to the group.

### **Covid-19**

A multiagency group commenced in April 2020 to support planning and collaborative working during the first Covid surge. The group has continued to meet to assist in communication and joint working in supporting communities during Covid. The group is attended by Western Trust, Public Health Agency (PHA), Department for Communities (DfC), Department of Agriculture, Environment and Rural Affairs (DAERA), Police Service of Northern Ireland (PSNI), Derry City and Strabane District Council (DCSDC), Causeway Coast and Glens Borough Council (CCGBC) and Fermanagh and Omagh District Council (FODC).

Covid-19 information has been translated into a range of different languages to ensure service users are kept informed. Interpreters remain available for appointments, uptake of telephone interpreting has increased to ensure safe social distancing. During July 2020 Regional Equality Colleagues worked to provide translations of Regional Visiting Guidance and information on vaccinations is provided in alternative languages on the PHA website. HSC organisations have also worked together to promote uptake of the vaccinations

among BAME communities.

Public Health England have produced a paper: Beyond the data: Understanding the impact of Covid-19 on BAME groups, [available here](#). This review found that the highest age standardised diagnosis rates of COVID-19 per 100,000 population were in people of Black ethnic groups (486 in females and 649 in males) and the lowest were in people of White ethnic groups (220 in females and 224 in males). Death rates from COVID-19 were higher for Black and Asian ethnic groups. when compared to White ethnic groups.

The Trust equality Lead continues to work with PHA and other organisations to provide both information and support to ethnic communities, particularly on the uptake of the Covid Vaccine. Trust staff have also assisted in the production of videos encouraging uptake of the vaccine in other languages links to this information is included on the Trust website.

Equality staff continue to liaise with RNIB staff and shared RNIB guidance re vaccine centres with relevant staff. Equality staff also liaised with RNIB to gather feedback on the experience of people with a visual impairment when attending the Trust vaccine centres. This feedback was shared with vaccine centre managers. Equality Lead has liaised with RNIB re feedback on online Visual Awareness Training that they have developed. Service users with additional support requirements can be fast tracked at Trust vaccination clinics. Those attending the centres have access to foreign language telephone interpreting or the remote sign language app.

Discussions have taken place with British Deaf Association regarding provision of their Deaf Equality Awareness Training via online. Disability Awareness Training, provided via contract with Employers for Disability NI has moved online and 3 sessions were held during 2020/21 with 90 staff members attending.

#### Action to continue through lifespan of plan.

Action Measure (5)	Description
Develop a range of involvement opportunities for service users, carers and the public to help ensure active and effective involvement of service users, carers and the public within the Western Trust.	<ul style="list-style-type: none"><li>• People are more involved and are consulted on decisions that affect their health and social care.</li><li>• Increased satisfaction and reduced complaints.</li></ul>

#### Progress Year 1

The Trust Website includes information on how service users/carers etc. can be involved. In accordance with the Trust's Personal and Public Involvement statutory duties there was considerable informal and ongoing engagement and involvement with individuals and representative organisations over 2018/19.

The Department of Health CoProduction Guidance was disseminated widely across the Trust and provides an easy reference guide on best practice and merits of co-production.

A subgroup of Service Users and Carers from the WHSCT PPI Steering Group met to discuss the practical implications of the CoProduction guide and how these could be effectively implemented in the Trust.

During 2018/19, the Clinical Education Centre also developed Co-Production Awareness sessions for delivery to service users, carers and staff across the region. This training was co-produced and it will be delivered across the Trust from April 2019 – March 2020. This training has been promoted widely across the Trust in March 2019, with service users, carers and staff encouraged to attend to develop their knowledge and skills in CoProduction.

### **Progress Year 2**

Flow Coaching is a model for Improvement which focuses on the patient's journey through the whole health and social care system. Rather than looking at a particular team or department this work requires teams who share care of patients to come together. The Flow Coaching model has designed a road map to help staff understand the current state of their system. It provides tools and structures to help staff develop change ideas and to test them out. Measurement is critical to ensuring that changes made are actually improving patient care. The work is facilitated by coaches working along with frontline staff and service users in improvement spaces called BigRooms.

In 2019-20 the Trust rolled out a new 2 hour training programme to staff, 'Introduction to Involvement'. This was face to face training to provide staff with the skills, knowledge and confidence to carry out involvement. The sessions were interactive, allowing staff to engage with the facilitator to better understand how to make involvement a reality in their roles. The sessions were very well received and have led to an increase in involvement activity for those in attendance. This training was underpinned by the already established elearning module available to all staff, 'Engage and Involve', which supports staff to understand the value and benefit of involving people and taking into account people's views in the planning, commissioning, delivery and evaluation of HSC service. 2019-20 also saw the Trust support the development of regional training for those members of the public, service users and carers who wish to become involved. This will help service users and carers gain knowledge and confidence to have their voices heard at the level which best suits their abilities and needs. This training will be rolled out in 2020-21.

### **Progress Year 3**

The Trust has continued to roll out training for staff to give them the skills and knowledge to offer opportunities for involvement and address perceived barriers to carrying out involvement. The Trust piloted SCOPE training to service users and carers to build capacity and confidence to be more involved in the development of Trust services.

The Trust carried out a large mapping exercise to highlight and showcase good models of involvement and share learning across teams and directorates. This will be developed further in 2021/22 to look at the impact and outcomes from this involvement. Alongside this the Trust has developed an Internal PPI Leads group of staff to share learning and experiences of involvement and push the involvement agenda in their specific areas of work.

The development of the new Trust Integrated Involvement Plan was informed by very effective involvement from service users, carers, the community and voluntary sector and staff. The opportunity for involvement was promoted widely through various channels and those wishing to be involved were supported to do so in a way which worked best for them. This meant that groups previously not involved in strategic work such as this in the Trust now had a mechanism to have their voices heard. The British Deaf Association and Mencap brought together groups of service users and carers to help develop the IIP and many of these individuals have gone on to be involved in other aspects of Trust service development.

The work of No More Silos also allowed the opportunity for detailed and effective involvement, work which will grow in 2021/22. The Trust developed and delivered 2 webinars to inform and educate the public on the key objectives of NMS and developed a strong Involvement Reference Group to feed into the work streams. The Webinar can be found on the Trust's involvement hub, [accessible here](#), along with the report from the event.

The Trust will also be developing a PPI communications plan and further utilising the online hub to promote opportunities for involvement. This will become a very effective resource to ensure everyone has access to the opportunities for involvement available to them.

Within Adult Learning Disability (ALD) the Trust Involvement team continues to develop and support the ALD strategic and local implementation approach to ensure engagement with ALD service users and carers are at every level of ALD services. 2 Local Involvement Facilitators and 1 Involvement Manager have been recruited to support this process.

Since the onset of COVID 19 until end April 2021 a total of 34 Local Involvement Group Meetings have been facilitated across the WHSCT area. These have been a mix of face-to-face and online meetings due to restrictions. Online arrangements have been challenging for some while the concern and fears of carers have affected attendance at face to face meetings. The meetings are held 6-8 weekly and are planned until end Dec 21. The Involvement facilitators and Involvement Manager develop and co-ordinate a range of programmes of work arising from the discussions at the Involvement groups.

The Strategic Involvement Group last met in Feb 2020 but has regrouped, the meetings have been arranged quarterly for the

remainder of the year with the next meeting in May 2021. A workshop was held in March 2021 to co-produce an Involvement Action Plan for Adult Learning Disability Services.

The Trust has developed a Hub and Spoke model of engagement for ALD Service users and carers to ensure an effective PPI approach to the development of the ALD services provided by WHSCT. Five Local ALD Involvement Groups, attended by staff, carers and service users, meet every 6-8 weeks. The discussions at the Local Involvement Groups feed into a quarterly Strategic Involvement Group.

The Groups are still in early stage development and require a high level of assistance. The Local Involvement Groups are promoted through the newsletters which are delivered quarterly to all families on the Master Patient Index (over 2,000 homes). Work is currently being undertaken to update the ALD HUB website to ensure optimum and best use of the site. The Involvement Database is a register of all families who have indicated an interest in Involvement and all programmes and events are promoted using the database. Adult Learning Disability Services have been developing cross-sectoral and interagency partnership working through the work of the Local Engagement partnership, which includes carers and service users.

#### **Action to continue through lifespan of plan.**

Action Measure (6)	Description
We will continue to involve Section 75 groups in the planning of new and reconfigured facilities.	<ul style="list-style-type: none"><li>• Better facilities that meet the needs of people with disabilities and other Section 75 groups.</li><li>• Issues raised on the fora are used to inform Trust Strategic Capital Developments.</li></ul>

#### **Progress Year 1**

Information was provided on the first phase of the new North Block at Altnagelvin Hospital and the new Rathview mental health facility in Omagh in a number of different online and offline formats. A video was produced on Rathview and hosted on the Trust's You Tube Channel and promoted through the Trust's social media channels and website

#### **Progress Year 2**

Following feedback from service users of the Omagh Hospital & Primary Care Complex works were completed to enhance access at the main entrance/set down area.

In the period two business case for the development of new primary health care facilities have been submitted to the Department of Health for consideration. The business cases included initial screening assessments for sustainability, equality and human rights.

Subject to approval and funding it is anticipated that Section 75 groups will be involved in the planning for these facilities.

### **Progress Year 3**

Although opportunities for engagement were limited due to the covid-19 pandemic, the Trust continued to ensure e.g. information on the new North Wing facility at Altnagelvin was shared in a number of formats. A particular focus was on preparing for transfer of services to the new main entrance area, ensuring everyone who needed to access services could do so as easily and efficiently as possible. Any business cases submitted for new developments continued to include initial screening assessments for sustainability, equality and human rights. Subject to approval and funding, Section 75 groups will be involved in the planning for and design of these facilities.

Equality staff continue to liaise with RNIB staff and shared RNIB guidance re vaccine centres with relevant staff. Equality staff also liaised with RNIB to gather feedback on their experience when attending the Trust vaccine centres. This feedback was shared with vaccine centre managers.

### **Action to continue through lifespan of plan.**

<b>Action Measure (7)</b>	<b>Description</b>
Social and Economic Regeneration Plan (SERP)  We will provide skills training and placement opportunities; tackling social exclusion and long term unemployment. We will supply chain opportunities for social enterprise, micro organisation and Small and Medium Sized Enterprises (SMEs).	The creation of social and economic opportunities throughout the life of new capital developments.

### **Progress Year 1**

The Directorate of Strategic Capital Development continue to comply with the Buy Social NI Construction Model, implemented by SIB and CPD in April 2016. There is a contractual requirement in major construction projects for targeted recruitment and training opportunities to be provided in government construction contracts. All SCD projects, including the current Altnagelvin North Block development incorporate this clause in the contract and compliance is monitored through the duration of the construction contract.

### **Progress Year 2**

The Directorate of Strategic Capital Development continue to comply with the Buy Social NI Construction Model, implemented by Strategic Investment Board and Construction & Procurement Delivery branch of the Department of Finance. There is a contractual

requirement in major construction projects for targeted recruitment and training opportunities to be provided in government construction contracts. All Strategic Capital development projects incorporate this clause in the contract and compliance is monitored through the duration of the construction contract.

### **Progress year 3**

The Trust remaining compliant with CPD Health Project guidelines during these periods, ensuring every effort was made to deliver all targets within a safe and compliant environment.

### **Action to continue through lifespan of plan**

## **Section 3 – Supporting our Staff**

The following actions help to promote equality of opportunity for our staff and support them to understand their responsibilities in valuing differences and advancing equality of opportunity to ensure an inclusive and welcoming environment

Action Measure (8)	Description
Review of uptake of Family Friendly policies. To be better informed of uptake of Family Friendly policies across the S75 categories.	<ul style="list-style-type: none"><li>• Increased uptake of Family Friendly policies.</li><li>• Increased awareness by managers of the application of Family Friendly policies.</li><li>• Increase in staff awareness of the policies – identify through staff survey results.</li></ul>

### **Progress Year 1**

The Trust continues to promote work life balance options to all staff. Information re applications via family friendly policies can be obtained from HRPTS. Stats being sought for numbers of requests for e.g. reduced hours refused.

Further info to be issued to managers re procedures to be followed when staff request e.g. reduced hours, flexible working. Analysis of change of hours via HRPTS to be undertaken 2019/20.

### **Progress Year 2**

Information on up-take of family friendly policies information in 2019/20 is with the Trust Working Longer group for review and analysis.

### **Progress Year 3**

Much of the work of the Human Resources Directorate has been impacted by the Covid-19 pandemic. Throughout this time our staff

have shown immense resilience and willingness to work innovatively to ensure many of our services continued to be sustained during this period. The Trust continues to promote work life balance options to all staff.

We recognise the significant demands that have been placed on staff both physically and emotionally and protecting the health, safety and wellbeing of our staff remains a priority for us and we will continue to work in partnership with staff and Trades Unions to ensure our staff are supported. We have factored in the need for staff to have flexible working necessary to support childcare and caring commitments. Staff across a range of service areas including human resources, occupational health, psychology, infection control and health improvement, have worked collaboratively to pool their expertise and resources to draw together a comprehensive package of practical support for our staff including e.g.:

- Trust Psychology staff have set up a number of support services for staff. This has included the establishment of a dedicated psychological support helpline, 1-hr Team Staff Support Sessions, 40-minute ‘Space for You’ individual sessions and 2.5 hr Webinars for managers on ‘Staff Wellbeing and Psychological Safety’. It is anticipated that these resources will remain in place until March 2022, with plans to introduce other staff support early autumn.
- A substantial number of staff have been supported to work remotely (including from home) through the roll out of additional laptops, mobile phones and other devices.

The Trust continues to promote work life balance options to all staff.

#### Action to continue through lifespan of plan.

Action Measure (9)	Description
We will promote the Trust Complaints Process.	<ul style="list-style-type: none"><li>• Improved service through the active and effective involvement of Trust staff in partnership with service users, carers and the public in improving services.</li><li>• Increased service.</li><li>• Increased awareness of issues with services.</li></ul>
We will work with service users and staff to support improvements in capturing issues/data.	

#### Progress Year 1

The Trust provides an accessible complaints procedure for all patients and clients and continues to monitor complaints received. The Trust Complaints Team considers specific Section 75 related complaints and promotes positive action as required.

#### Progress Year 2

The Trust's Complaints Department has been selected to take part in an Ulster University Complaints Study. Discussions with them in

relation to this have been ongoing since early 2019. This study will examine the longitudinal experience of making a complaint to the NHS from the patient's perspective. The project is built on the Team's previous work on NHS complaints, including a pilot study of a small set of recorded complaints calls to the Scottish NHS Health Board, which examined patterns of response by call handlers and the resulting effects on the conversation. The findings clearly demonstrated the potential for research on communication to lead to improvements in patients' experience of NHS Complaints handling.

Following completion of the study, a communication training resource will be developed – "Real Complaints" which will be based on the findings and in consultation with key stakeholders. By recalibrating how complaints staff respond to complainants, we can transform the service users' experience, thereby addressing evidence based manner, key system failures that can lead to litigation.

The Trust refers people to the Patient and Client Council (PCC) for support as part of their messaging to the public. The Trust makes reference to this in its acknowledgement letters to all new Complainants. Reference to PCC support is also included in the Trust's complaints leaflet.

### **Progress Year 3**

From early August 2020, in addition to the Trust Complaints procedure, service users, the general public etc. can access 'Care Opinion'. Care Opinion is an independent non-profit feedback platform for HSC, supported by the Department of Health and implemented by the Public Health Agency (PHA). It enables service users and their families, anonymously, to give real time feedback on their Health and Social Care received and share their stories with others in a safe and simple manner. To make the system more accessible there are a number of options people can choose e.g. British and Irish Sign language, ability to change font sizes and contrasts for anyone with visual impairment. A wide selection of languages are also accessible. For those with sensory or communication difficulties there is also the opportunity to use pictures, i.e. Talking mats to share their experiences. Those submitting stories are also requested to complete Equality Information e.g. their gender, age, whether they have a disability etc.

Managers and designated responders within the Trust are able to respond directly using the platform. During the COVID 19 pandemic, Zoom training sessions for responders were coordinated by the Trust Patient Client Experience facilitator and Care Opinion Team based in Sheffield.

### **Action to continue through lifespan of plan**

Action Measure (10)	Description
Review training and ensure that S75 groups, who have highlighted staff attitudes as a particular issue are appropriately covered e.g. Lesbian, Gay, Bisexual and	<ul style="list-style-type: none"><li>Increased understanding of how to integrate equality and good relations considerations into everyday practice.</li></ul>

<p>Transgender (LGBT) people, people with disabilities (including autism), people from minority communities and older people. Continue to work with S75 groups to develop and deliver training.</p>	<ul style="list-style-type: none"> <li>• Improved staff attitudes.</li> <li>• Improved understanding of equality issues and legislation by staff in SLA organisations.</li> </ul>
<p>Open up training to include participation from staff in organisations that have Service Level Agreements (SLAs) with the Trust/Co-operation and Working Together (CAWT) etc.</p>	

#### **Progress Year 1**

In 2018/19, Sexual Orientation Awareness Training, facilitated by HERe NI, was delivered to midwives. During 2019/20 there are plans to run this for midwives and health visitors and partner with Ulster University School of Nursing to provide awareness training to 2<sup>nd</sup> Year Student Nurses.

During 2018/19 2 Transgender Awareness sessions were delivered by SAIL NI and Transgender NI were held. Sessions were open to Trust Staff and Practitioners working with community organisations with a remit for promoting Health and wellbeing. It is anticipated that these sessions will run again once funding is agreed with the Public Health Agency for the 2019/20 plan.

During 2018/19 6 Traveller Cultural sessions were delivered across the Western Trust area.

During 2018/19 face to face sessions of the Trust Mandatory Equality, Good Relations and Human Rights E-learning programme were developed and piloted with Homecare staff. From October to November 2018 286 members of homecare and reablement staff undertook the training. Staff members from a Day Centre and Theatres also completed the training, bringing the total to 335. In total, 2,689 members of Trust staff completed the Making a Difference training in the 2018 - 2019 reporting period. There are plans to roll the face to face training sessions out further during 2019/20. Staff are reminded of the requirement to undertake the online training regularly through Trust Communications. The training also forms part of the induction programme for new members of staff.

#### **Progress Year 2**

The Traveller Health and Wellbeing Programme aims to improve the health outcomes of travellers in the Western Trust Area. Together with the Traveller Action Group (TAG) staff work collaboratively to improve health and reduce health inequalities for Travellers. The Traveller Action Group includes membership from community and voluntary groups and Housing Executive, Education, Councils etc. and during the reporting period developed an action plan.

During 1 April 2019 to 31 March 2020 the Traveller Development Officer arranged 6 Cultural Awareness Sessions, which were attended by 79 people including Trust staff, Education Authority staff etc. An additional, more informal presentation on the culture/experiences of Travellers, followed by a question and answer session was facilitated by a member of the Travelling community at the request of staff from the Obstetrics & Gynaecology Dept, in Altnagelvin Hospital, 10 staff members attended this.

In 2019/20 Health Improvement, Equality and Involvement within the Trust arranged Sexual Orientation Awareness Training, aimed at Midwives and Health Visitors. Student nurses, in training at Magee University, were also encouraged to attend. Sessions were delivered by HERe NI, a community organisation and registered Belfast charity who support lesbian and bisexual women and family and improve the lives of L & B women across Northern Ireland, through providing information; peer support; facilitating training; lobbying government and agencies. The training was attended by 214 Student Nurses at Magee and 77 Trust Health Visitors/Midwives. After attending sessions participants were more aware of the size and diversity of the LGBT population in N. Ireland and more aware of the use of appropriate language as well as more confident in terms of how to support same sex parents and where to source further support if needed.

Transgender Awareness training was also delivered by HERe NI on 17 June 2019 with 214 student nurses attending. Under the sexual health action plan staff targeted student nurses while so that they would already have the information and use it early in their careers. A rural community group working to support Trans people in their community were also keen to undertake the training and 17 staff and some trans young people attended the session on 27 November 2019. Outcomes included increased knowledge about the Trans community in N. Ireland and the issues that affect them, as well as increased knowledge of support available to the trans community and their families.

### **Progress Year 3**

Training was severely impacted by the Covid-19 pandemic, the need to socially distance, infection prevention and control measures and demand on the workforce as a result of the pandemic. However, within the timeframe the uptake of the HSC Equality, Good Relations and Human Rights Training E-learning programme 'Making a Difference' increased. This is an interactive programme tailored specifically to the healthcare setting and aims to ensure that all staff realise the importance of their part in creating an inclusive and welcoming environment for all colleagues and service users.

'Making a Difference' is supported by a regional Equality Training manual for staff which complements the programme. Staff can download a copy of the training manual via the programme. The programme is also complemented by a suite of HSC Discovering Diversity awareness modules, which all staff are also encouraged to complete.

The aim of the 'Making a Difference' training is to show staff how they can make a difference by:

- Promoting positive attitudes to diversity
- Ensuring they treat everyone with respect and dignity
- Behaving in a way that is in keeping with HSC values and equality and human rights law.

Plans are in place to deliver the training via zoom during 2021/22 to staff who do not have access to Trust computers. The programme also will be updated in 2021 to reflect changes to legislation etc.

#### **Action to continue through lifespan of plan.**

Action Measure (11)	Description
Appropriate Volunteer support agreed with clearly defined tasks as part of agreement with staff, volunteers and patients/carers.	<ul style="list-style-type: none"> <li>• Increase in staff awareness of the role of Volunteers</li> <li>• Identify through staff survey results of the impact of Volunteer Roles</li> <li>• Benefits to staff/patients/ carers noted.</li> </ul>

#### **Progress Year 1**

All volunteers receive a comprehensive induction. Volunteers also have the opportunity to attend Deaf Awareness, Disability Awareness and Visual Awareness Training. The Trust continues to work to develop the volunteer Role Description. We await the results of questionnaires issued to staff and volunteers. The next phase will involve feedback from service users, carers etc. who have used the volunteering service.

#### **Progress Year 2**

There are 140 active volunteers across the Trust in a range of roles. Staff awareness has been heightened in relation to the role of Volunteers and staff feedback on the involvement and the impact of Volunteer Roles is regularly sought and remains positive. Complements are regularly received and feedback also indicates that volunteer involvement is much appreciated by patients, visitors and staff alike. . The most recently introduced role of Dementia Friend has made a valuable contribution to supporting patients and staff.

#### **Progress Year 3**

Covid-19 has led to the postponement of Volunteering across the Western Trust since March 2020. This included all face to face volunteering and registration for new volunteers etc. Some exceptions did apply e.g. Breast Feeding Peer Support Volunteer role has continued via telephone, as it would have pre-Covid. This service has been extremely beneficial in providing relevant support to new Mothers following discharge from Hospital. Breastfeeding peer support link worker/s have provided support to this group of volunteers throughout.

Work has been ongoing to plan for the reintroduction of volunteering. This would be on a phased basis and only when all the relevant safety measures, risk assessments etc. are in place. It may be that some volunteer roles will not be reinstated for a further period of time.

#### Action to continue through lifespan of plan.

Action Measure (12)	Description
<p>Managers will support staff to complete all mandatory training. Managers will annually review uptake of mandatory training for their staff/staff teams.</p> <p>Managers will promote completion of mandatory training in the first instance within working hours, as far as is reasonably practicable given the consideration of service needs.</p>	<ul style="list-style-type: none"> <li>Trained HSC staff.</li> <li>Training completed noted on Personal Development Plans for HSC staff (monitored via annual review meetings staff and line manager).</li> </ul>

#### Progress Year 1

Reports can be produced by Management Development on uptake of Mandatory Training by Directorate or Department. Automatic reminders are issued via email for some training to advise staff that training will expire soon. Mandatory training requirements are regularly emailed to staff via Trust Communication and highlighted at annual staff appraisals.

#### Progress Year 2

Reports are produced by the Trust Management Development Department on the uptake of Mandatory Training, reminders are issued to staff where training is due to expire. Requirements for mandatory training are regularly highlighted to staff on the staff intranet, via Trust Communication and department meetings.

Mandatory Equality and Human Rights eLearning training ‘Making a Difference’ delivered, during 7 sessions, to 117 staff members who do not regularly use computers face to face including groups of staff from Estates, Transport and Theatres.

#### Progress Year 3

Directorates continue to receive reports on uptake of mandatory training by their staff. During the current pandemic work has been undertaken to ensure that those staff who normally may have received the training via face to face delivery had the opportunity to receive it via zoom, Microsoft teams etc. Management Development is currently working with those departments who have mandatory training programmes for staff to set up a programme to highlight the training and organise online sessions for mandatory training day in April 2021.

Whilst the pandemic impacted on provision of face-to-face training uptake of e.g. the HSC Equality, Good Relations and Human Rights Training E-learning programme ‘Making a Difference’ increased. The interactive programme is tailored specifically to the healthcare setting and aims to ensure that all staff realise the importance of their part in creating an inclusive and welcoming environment for all colleagues and service users. ‘Making a Difference’ is supported by a regional Equality Training manual for staff which can be downloaded via the programme.

Plans are in place to deliver the training via zoom during 2021/22 to staff who do not have access to Trust computers. The programme also will be updated in 2021 to reflect changes to legislation etc.

**Action to continue through lifespan of plan**



Western Health  
and Social Care Trust

Appendix 4

Interpreting Provision

2020-2021

## Appendix 4: Foreign Language Interpreting Provision for Western Health and Social Care Trust

**Table 1: Total Provision and Expenditure with Language Breakdown 1 April 2020 – 31 March 2021**

Language	Total Provision for each language		Total per Language
	NIHSCIS	Big Word	
Polish	1166	510	1676
Arabic	843	425	1268
Lithuanian	291	159	450
Hungarian	265	115	380
Bulgarian	203	141	344
Russian	214	127	341
Romanian	192	75	267
Mandarin	125	21	146
Slovak	71	27	98
Latvian	76	15	91
Cantonese	77	10	87
Punjabi	50	7	57
Hindi	35	17	52
Turkish	31	3	34
Farsi	25	3	28
Portuguese	5	13	18
Spanish	9	6	15
Urdu	11	2	13
Thai	9	1	10
Vietnamese		7	7
Tetum	5		5
Czech		4	4
Bengali		3	3
Greek		1	1
Oromo		1	1
Amharic		1	1
<b>Total Provision</b>	<b>3703</b>	<b>1694</b>	<b>5397</b>
<b>Total Cost</b>	<b>£ 195,061</b>	<b>£11,548.86</b>	<b>£206,609.86</b>
<b>Average Cost</b>	<b>£52.68</b>	<b>£6.82</b>	

**Table 2: No. of Provisions for Western Trust – NIHSCIS Only for past 13 financial years for comparison:**

Year	2020/ 2021	2019/ 2020	2018/ 2019	2017/ 2018	2016/ 2017	2015/ 2016	2014/ 2015	2013/ 2014	2012/ 2013	2011/ 2012	2010/ 2011	2009/ 2010	2008/ 2009
<b>No. of provisions</b>	3703	7058	6914	6,237	6713	5693	6423	6272	5520	5051	4201	3777	3042

**Table 3: Total No. of Foreign Language Interpreting Provisions for Western Trust for past 13 financial years:**

Year	2020/ 2021	2019/ 2020	2018/ 2019	2017/ 2018	2016/ 2017	2015/ 2016	2014/ 2015	2013/ 2014	2012/ 2013	2011/ 2012	2010/ 2011	2009/ 2010	2008/ 2009
<b>No. of provisions</b>	5397	8009	8045	8343	8901	7808	8440	8172	7476	6741	5348	5529	4834

**Table 4: Top 5 Language Interpreting Sessions within WHSCT for previous 8 years**

2020/2021	2019/2020	2018/2019	2017/2018	2016/2017	2015/2016	2014/2015	2013/2014
Polish							
Arabic	Arabic	Arabic	Lithuanian	Hungarian	Hungarian	Hungarian	Lithuanian
Lithuanian	Lithuanian	Lithuanian	Hungarian	Cantonese	Cantonese	Cantonese	Hungarian
Hungarian	Hungarian	Hungarian	Mandarin	Lithuanian	Mandarin	Lithuanian	Cantonese
Bulgarian	Bulgarian	Mandarin	Cantonese	Arabic	Lithuanian	Mandarin	Mandarin

## **APPENDIX 4: Sign Language Provision in the Western Trust Area**

**12-Month Report: 1 April 2020 – 31 March 2021**

**Hands That Talk - Sign Language Interpreting: Expenditure 1 April 2020 – 31 March 2021:**

<b>No of Provisions</b>	<b>499</b>
<b>Cost</b>	<b>£65,605.22</b>
<b>Average Cost</b>	<b>£131.47</b>

**No. of Provisions for Western Trust – Hands that Talk for past 10 financial years for comparison:**

<b>Year</b>	<b>2020/ 2021</b>	<b>2019/ 2020</b>	<b>2018/ 2019</b>	<b>2017/ 2018</b>	<b>2016/ 2017</b>	<b>2015/ 2016</b>	<b>2014/ 2015</b>	<b>2013/ 2014</b>	<b>2012/ 2013</b>	<b>2011/ 2012</b>	<b>2010/ 2011</b>
<b>No. of provisions</b>	499	847	817	796	842	746	813	647	429	384	296