

Equality, Good Relations and Human Rights Screening Template

*****Completed Screening Templates are public documents and will be posted on the Trust's website*****

See [Guidance Notes](#) for further background information on the relevant legislation and for help in answering the questions on this template (follow the links).

(1) Information about the Policy/Proposal

(1.1) Name of the policy/proposal

The proposal outlines how Northern Trust (NHST) propose to purchase domiciliary care provided by non-statutory providers.

(1.2) Is this a new, existing or revised policy/proposal?

New

(1.3) What is it trying to achieve (intended aims/outcomes)?

To implement a contract model for the procurement and future delivery of non-statutory domiciliary care services across the NHST area. Domiciliary care is the provision of personal care and practical support that is necessary to maintain a service user in a measure of health, wellbeing, hygiene and safety as assessed by the Trust. Currently domiciliary care services are delivered by statutory and non-statutory providers to over 5000 service users in their own home. The way NHST purchase domiciliary care needs to change due to legislative requirements and also to ensure services provided meet the current and future needs of the NHST population. Approximately 25% of the population of NI live within the NHST, increasing to 27% when only looking at age 75+. Over the next 10 years the population of NHST age 85+ is expected to increase by 49%, nearly half of the population.

Anticipated outcomes are:

- Responsive and equitable service delivery including the timeliness of when a service will start, both following an admission to an acute hospital and when a person is assessed as needing a service whilst living in their own

home. The service must also be equitable across the whole Trust locality, with no service user being disadvantaged due to their home address or any other factors.

- Alignment to strategic direction as a more person centred, flexible approach will be taken to the delivery of care.
- Application of robust governance arrangements for the delivery of quality domiciliary care services that provide the required assurances including, but not limited to, hours delivered and lone worker arrangements
- consistency and continuity of care
- EU procurement directives and legislative compliance. Domiciliary care services have traditionally been purchased on an annual basis from established non-statutory providers with contracts rolling forward each year. NHSCT procurement processes need to be compliant with Public Contracts Regulations (2015).

(1.4) Are there any Section 75 categories (see list in 3.1) which might be expected to benefit from the intended policy/proposal?

Domiciliary care services are provided to members of the population who have been care assessed as requiring assistance with personal care and practical support to maintain them in a measure of health, well-being hygiene and safety as directed by the NHSCT. The majority of service users are older people over 65, people who have a physical, sensory or learning disability or people who have a mental health condition. Domiciliary care is also delivered to children and young people with a disability.

It is anticipated Section 75 categories aligned to this service user profile will benefit: the categories of age, people with disability and people with dependents (this last category benefitting as a result of the service being provided to their family member).

(1.5) Who owns and who implements the policy/proposal - where does it originate, for example DHSSPS, HSCB?

Northern HSC Trust

(1.6) Are there any factors that could contribute to/detract from the intended aim/outcome of the policy/proposal/decision? (Financial, legislative or

other constraints?)

Compliance with legislative requirements, Public Contract Regulations NI 2015, is a contributing factor

(1.7) Who are the internal and external stakeholders (actual or potential) that the policy/proposal/decision could impact upon? (staff, service users, other public sector organisations, , trade unions, professional bodies, independent sector, voluntary and community groups etc)

Service users, carers, non-statutory providers of domiciliary care, care workers (employed by non-statutory providers) and trade union representatives.

(1.8) Other policies with a bearing on this policy/proposal (for example regional policies) - what are they and who owns them?

Public Contracts Regulations NI 2015

Health and Well Being 2026 – Delivering Together (2016)

HSCB Regional Review of Domiciliary Care Services

Expert Advisory Panel on Adult Care and Support report – “Power to People – Proposals to reboot adult care and support in NI”

(2) Available evidence

Evidence to help inform the screening process may take many forms. What evidence/information (both qualitative and quantitative) have you gathered to inform this policy? Specify details for relevant Section 75 categories.

Details of evidence/information

Profile of Service Users by Section 75 equality category.

NHSCT Population Profile (Census 2011)

(Trust Staff are not affected by this proposal.)

Table detailing make-up of potential service users affected by the proposal

Section 75 Group	Make up of Patients/Clients affected	Percentage Domiciliary Care
Gender	Female Male	63% 37%
Religion	Protestant Roman Catholic Other	Not collected
Political Opinion	Broadly Unionist Broadly Nationalist Other	Not collected
Age	0-15 16-24 25-44 45-64 65-84 85+	Average age of 78 years
Marital Status	Single Married Other	Not collected
Dependent Status	Caring for a Child/Children/Dependant Older Person/Person(s) With a Disability None/Not known	Not collected
Disability	Yes No Not known	100%
Ethnicity	Black African Bangladeshi Black Caribbean Chinese Indian Irish Traveller Pakistani Mixed Ethnic Filipino Black Other Asian Other White Other	Not collected
Sexual Orientation towards:	Opposite Sex Same Sex Same and Opposite Sex Do Not Wish To Answer/Not known	Not collected

Profile of Northern Health and Social Care Trust Resident Population

SECTION 75 GROUP	NORTHERN AREA POPULATION (TOTAL POPULATION 463,297 from 2011 Census)
Gender	Female 50.99% Male 49.01% (2011 Census figures)
Age	0 -14 15-39 40-64 65-84 85+ 19.47% 32.98% 32.34% 13.46% 1.74% (2011 Census figures)
Religion	Protestant Roman Catholic None Not Known 51.89% 30.61% 10.82% 6.68% (2011 Census figures)
Political Opinion	Not collected
Marital Status (2011 census)	Single Married Not Known 33.28% 54.62% 12.1% (2011 Census figures)
Dependent Status (based on 177,914 households, census 2011)	Households with dependent children 33.98% (2011 Census figures)
Disability (based on 177,914 households, census 2011)	Household with one or more persons with a limiting long term illness 38.79% (2011 Census figures)
Ethnicity	Black African – 0.02% Irish Traveller – 0.05% Bangladeshi – 0.01% Pakistani – 0.04% Black Caribbean – 0.01% Mixed Ethnic Group– 0.18% Chinese – 0.23% White – 99.29% Indian – 0.09% Not Known – 0.05% Other Black – 0.01%
Sexual Orientation	Estimated 6-10% of persons identify as lesbian, gay, bisexual <i>Source: 2012 report by Disability Action & Rainbow Project</i>

(3) Needs, experiences and priorities

(3.1) Taking into account the information above what are the different needs, experiences and priorities of each of the Section 75 categories and for both service users and staff.

Category	Needs, experiences and priorities	
	Service users	Staff
Gender	<p>The 2011 Census confirms that women are on average living longer than men, with females representing 60% of the over 65s in the general population. This could suggest that females will be greater impacted by this proposal however due to the nature of the service provided which requires the assessment of the Service User's individual needs in their own home, it is not anticipated there would be an adverse impact in terms of gender. It is important to note that the service will continue to be provided based on assessed need.</p>	None
Age	<p>Due to the nature of the service provided which requires the assessment of the service user's individual needs in their own home, it is not anticipated there would be an adverse impact in terms of age. With the average age of a service user</p>	None

	being 78, there may in fact be a positive impact from this proposal as it will provide stability of service provision.	
Religion	All services will be expected to respect the particular religious affiliation of the service user they are caring for and make the necessary arrangements for the service user to practice his/her religious beliefs. Due to the nature of the service provided which requires the assessment of the service user's individual needs in their own home, it is not anticipated there would be an adverse impact in terms of religion.	None
Political Opinion	The Trust does not collect information on political opinion. Due to the nature of the service provided which requires the assessment of the service user's individual needs in their own home, it is not anticipated there would be an adverse impact in terms of political opinion.	None
Marital Status	The Trust is mindful that there may be a higher prevalence of service users who are widowed compared to the general population, given the age profile of the service users. Due to the nature of the service provided which requires the assessment of the service user's individual needs in their own home, it is not anticipated there would be an adverse impact in terms of marital status.	None
Dependent	The Trust is mindful that many	None

Status	<p>of the service users affected by this proposal will be supported by family carers. Carers are entitled to an individual carer's assessment to identify their specific needs and to establish the impact of caring on their own health and wellbeing.</p> <p>Due to the nature of the service provided which requires the assessment of the service user's individual needs in their own home, it is not anticipated there would be an adverse impact in terms of dependent status.</p>	
Disability	<p>Whilst the Trust does not currently collect statistical information relating to levels of disability amongst its Service Users of domiciliary care, it is predicted that the service users will have some level of disability, given the nature of the service provided. Due to the nature of the service provided which requires the assessment of the service user's individual needs in their own home, it is not anticipated however there would be an adverse impact in terms of disability.</p>	None
Ethnicity	<p>The Trust is committed to ensuring its services are accessible to everyone.</p> <p>Due to the nature of the service provided which requires the assessment of the service user's individual needs in their own home, it is not anticipated there would be an adverse impact in terms of ethnicity.</p>	None

Sexual Orientation	Whilst no direct information is gathered on sexual orientation, population trends estimate that 6-10% of the population are from the gay, lesbian, bisexual or 'trans' (transsexual, transgendered and transvestites) (LGBT) community. The Trust will adhere to best practice guidelines. Due to the nature of the service provided which requires the assessment of the service user's individual needs in their own home, it is not anticipated there would be an adverse impact in terms of sexual orientation.	None
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(3.2) Provide details of how you have involved stakeholders, views of colleagues, service users and staff etc when screening this policy/proposal.

A service user and carer event took place on 26 May 2021. Questionnaires were also issued and responses collated. Patient and Client Council also facilitated the Adult Care and Support Reference Group

A summary of feedback from Service Users and Carers is contained within the consultation paper.

During the 12 week consultation period further stakeholder engagement events will be held to allow members of the public/stakeholders to comment on the proposed model.

(4) Screening Questions

You now have to assess whether the impact of the policy/proposal is major, minor or none. You will need to make an informed judgement based on the information you have gathered.

(4.1) What is the likely impact of equality of opportunity for those affected by this policy/proposal, for each of the Section 75 equality categories?			
Section 75 category	Details of policy/proposal impact		Level of impact? Minor/major/none
	Services Users	Staff	
Gender	None noted – assessment and any subsequent care delivery takes place in service user’s home	Not applicable	None
Age	As above	Not applicable	None
Religion	As above	Not applicable	None
Political Opinion	As above	Not applicable	None
Marital Status	As above	Not applicable	None
Dependent Status	As above	Not applicable	None
Disability	As above	Not applicable	None
Ethnicity	As above	Not applicable	None
Sexual Orientation	As above	Not applicable	None

(4.2) Are there opportunities to better promote equality of opportunity for people within Section 75 equality categories?	
Section 75 category	Please provide details
Gender	The Trust will continue to engage with service users and carers to make sure their needs are met.
Age	The Trust will continue to engage with service users and carers to make sure their needs are met.
Religion	All Trust services provide a welcoming

	environment where people of differing religious backgrounds are care for together necessary arrangements are made for service user to practice his/her religious beliefs
Political Opinion	All Trust services provide a welcoming environment where people with differing political opinion are cared for together
Marital Status	The Trust will continue to engage with service users and carers to make sure their needs are met.
Dependent Status	The Trust will continue to engage with service users and carers to make sure their needs are met.
Disability	The Trust will continue to engage with service users and carers to make sure their needs are met.
Ethnicity	The Trust is mindful that there are increasing numbers of people of Eastern European origin living in the Northern Trust area. The Trust is committed to ensuring that its services are accessible to everyone and provides an interpreting service for those whose first language is not English.
Sexual Orientation	The Trust will continue to engage with service users and carers to make sure their needs are met.

(4.3) To what extent is the policy/proposal likely to impact on good relations between people of different religious belief, political opinion or racial group? minor/major/none		
Good relations category	Details of policy/proposal impact	Level of impact Minor/major/none
Religious belief	The Trust is committed to the promotion of good relations and has incorporated compliance to Section 75	None

	equality duties into its contracts with service providers. Through Section 75 Equality duties non-statutory providers have a duty to ensure equality of opportunity and the promotion of good relations for staff and service users	
Political opinion	As above	None
Racial group	As above	None

(4.4) Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?	
Good relations category	Please provide details
Religious belief	<p>The Trust is committed to ensuring that staff, patients, service users and carers have equality of access to services and feel welcome, comfortable and safe accessing all Trust facilities, irrespective of race, religion or political opinion.</p> <p>The promotion of Good Relations is an integral part of Northern Trust’s commitment to improve the health and wellbeing of all our staff. We strive to ensure that all staff irrespective of religion, race or political opinion feel safe, welcomed and comfortable in work. This is confirmed by the regionally developed Good Relations statement developed as part of Good Relations week 2020 (and detailed below):</p> <p>Working together we will promote good relations between people of different race, religion or political opinion</p> <p>This means that we:</p> <ul style="list-style-type: none"> • Will actively address and challenge racism and sectarianism in all its forms • Will treat each other fairly, with respect and dignity • Will make sure our spaces are shared, welcoming and safe.
Political opinion	As above
Racial group	The Trust is committed to ensuring its services are

accessible by the whole community. The Trust ensures access to interpreting support and a range of translated information for those whose first language is not English.

(5) Consideration of Disability Duties

(5.1) How does the policy/proposal encourage disabled people to participate in public life and promote positive attitudes towards disabled people?

The proposal is aimed at enabling service users with disabilities to maintain independence and be cared for in the home thus upholding the duties

(6) Consideration of Human Rights

(6.1) Does the policy/proposal affect anyone’s Human Rights?
Complete for each of the articles

Article	Positive impact	Negative impact = human right interfered with or restricted	Neutral impact
Article 2 – Right to life			✓
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment			✓
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour			✓
Article 5 – Right to liberty & security of person			✓
Article 6 – Right to a fair & public trial within a reasonable time			✓
Article 7 – Right to freedom from retrospective criminal law & no punishment without law			✓
Article 8 – Right to respect for private & family life, home and correspondence.			✓
Article 9 – Right to freedom of thought, conscience & religion			✓
Article 10 – Right to freedom of expression			✓
Article 11 – Right to freedom of assembly & association			✓
Article 12 – Right to marry & found a family			✓
Article 14 – Prohibition of discrimination in the enjoyment of the convention rights			✓
1 st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			✓
1 st protocol Article 2 – Right of access to education			✓

Please note: If you have identified potential negative impact in relation to any of the Articles in the table above, speak to your line manager and/or Equality Unit. It may also be necessary to seek legal advice.

(6.2) Please outline any actions you will take to promote awareness of human rights and evidence that human rights have been taken into consideration in decision making processes.

The general terms and conditions of contracts with Providers will include a clause regarding Provider compliance with Human Rights legislation. The Provider must comply with the Human Rights Act 1998 as if it were a 'Public Authority' within the meaning of the legislation.

(7) Screening Decision

(7.1) Given the answers in Section 4, how would you categorise the impacts of this policy/proposal?

Major impact	
Minor impact	
No impact	✓

(7.2) Do you consider the policy/proposal needs to be subjected to ongoing screening

Yes	✓
No	

(7.3) Do you think the policy/proposal should be subject to an Equality Impact Assessment (EQIA)?

Yes	
No	✓

(7.4) Please give reasons for your decision and detail any mitigation considered.

The proposal is aimed at providing high quality domiciliary care services to the population of the Trust. The proposed outline service model sets the Trust's future procurement arrangements with non-statutory service provider organisations ensuring that services purchased are in line with strategic direction and legislative compliance.

The proposal is likely to result in TUPE arrangements being put in place for some non-statutory service provider staff, which may have the potential to have an adverse effect on service users. Mitigation to avoid this situation and ensure continuity of care services is set out in the consultation paper.

The screening has been deemed as an on-going detailed screening to allow on-going monitoring of the proposal to enable identification of any possible unforeseen adverse impact over a period of time in terms of equality of opportunity, good relations and Human Rights. This will allow for further mitigating measures to be implemented if and when appropriate.

(8) Monitoring

Please detail how you will monitor the effect of the policy/proposal for equality of opportunity and good relations, disability duties and human rights?

The Trust will monitor the effect of the proposal through the following:

- Service User feedback – through compliments and complaints
- Feedback from carers, families and advocates
- The Trust's quality monitoring procedures

Approved by:

Trust Board

Date:

26 August 2021