

SCREENING TEMPLATE

See Guidance Notes for further information on the ‘why’ ‘what’ ‘when’, and ‘who’ in relation to screening, for background information on the relevant legislation and for help in answering the questions on this template.

(1) INFORMATION ABOUT THE POLICY OR DECISION

1.1 Title of policy or decision

Manual Handling Policy

1.2 Description of policy or decision

- **What is it trying to achieve?**
- **How will this be achieved?**
- **What are the key constraints?**

To establish a policy document of the Business Services Organisation’s responsibility for reporting all incidents/risks to ensure the safety and well-being of staff and to assist in the effective running of daily operations.

1.3 Main stakeholders affected (internal and external)

BSO Staff are the main stakeholders affected by this policy., It is recognised that there are BSO staff members with specific needs and the organisation will take reasonable steps to assist those identified.

1.4 Other policies or decisions with a bearing on this policy or decision

This policy takes into consideration the legal requirements of:-

The Health and Safety at Work Act 1974

Management of Health and Safety at Work Regulations 1992

Management of Health and Safety at Work Regulations (Northern Ireland) 2000

Workplace (Health, Safety and Welfare) Regulations 1992

Workplace (Health, Safety and Welfare) Regulations (Northern Ireland) 1993

Manual Handling Operations Regulations 1992 (Amended 2002)

Provision and Use of Work Equipment Regulations 1998 (PUWER 1998)

Provision and Use of Work Equipment Regulations (Northern Ireland) 1999

Lifting Operations and Lifting Equipment Regulations 1998 (LOLER 1998)

Lifting Operations and Lifting Equipment Regulations (Northern Ireland) 1999

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

Human Rights Act 1998

Disability Discrimination Act 1995

Discussions have also taken place with Staff, Equality Unit, Monitoring Data and Good practice

(2) CONSIDERATION OF EQUALITY AND GOOD RELATIONS ISSUES AND EVIDENCE USED

2.1 Data gathering

What information did you use to inform this equality screening? For example previous consultations, statistics, research, Equality Impact Assessments (EQIAs), complaints. Provide details of how you involved stakeholders, views of colleagues, service users, staff side or other stakeholders.

Census data (2011)

BSO employee data (2019)

Health Survey NI, 2017

Carers NI State of Caring 2017 Annual survey (UK wide, including NI)

HSC Interpreting Service data

2.2 Quantitative Data

Who is affected by the policy or decision? Please provide a statistical profile. Note if policy affects both staff and service users, please provide profile for both. Also give consideration to multiple identities.

Category	<i>What is the makeup of the affected group? (%) Are there any issues or problems? For example, a lower uptake that needs to be addressed or greater involvement of a particular group?</i>
Gender	<p>The proportion of females in 2011 is 51.00% (923, 540). The male population is 49.00% (887, 323) in 2011.</p> <p>The BSO presently 1103 employees of which there are 505 male and 598 female (42.45% male; 57.55 female)</p>
Age	<p>On Census day (27 March 2011) 1,810,900 people were resident in Northern Ireland. This equates to a 7% increase over the last 10 years. NISRA underlines that this is the highest ever recorded population in Northern Ireland.</p> <p>The age structure of the population has changed markedly since the 2001 Census.</p> <ul style="list-style-type: none"> • Overall, the share of 0-39 year olds has decreased whereas those of

	<p>people aged 40 years and over has increased.</p> <ul style="list-style-type: none"> • The population of people aged 65 and over has grown by 18%. This increase is largely due to the increase of the most elderly population: the group of those aged 85 and over has grown by 35%. • In marked contrast, the number of children has decreased by 5%. <ul style="list-style-type: none"> • 0 – 15 – 20.95% (379, 378) • 16 – 19 – 5.61% (101, 589) • 20 – 24 – 6.96% (126, 036) • 25 – 29 – 6.85% (124, 044) • 30 – 44 – 20.65% (373, 943) • 45 – 59 – 19.21% 347, 867) • 60 – 64 – 5.21% (94, 346) • 65 – 74 – 8.04% (145, 593) • 75 – 84 – 4.79% (86, 740) • 85 – 89 – 1.17% (21, 187) <p>90 and over - 0.56% (10, 141)</p> <p>Total 1,810,900.</p> <p>The BSO workforce age breakdown comprises of</p> <p>16-24 years: 1.26% 25-29 years: 7.63% 30-34 years: 12.89% 35-39 years: 14.39% 40-44 years: 13.52% 45-49 years: 16.98% 50-54 years: 14.86% 55-59 years: 11.64% 60-64 years: 5.66% >=65 years:1.18%</p>
Religion	<p>Religion or Religion brought up in</p> <ul style="list-style-type: none"> • 45.14% (817, 424) of the population were either Catholic or brought up as Catholic. • 48.36% (875, 733) stated that they were Protestant or brought up as Protestant. • 0.92% (16, 660) of the population belonged to or had been brought up in other religions and Philosophies. • 5.59% (101, 227) neither belonged to, nor had been brought up in a religion.

	<p>The BSO workforce:</p> <p>Perceived Protestant 2.59%</p> <p>Protestant 30.50%</p> <p>Perceived Roman Catholic 3.38%</p> <p>Roman Catholic 40.80%</p> <p>Neither 1.65%</p> <p>Perceived Neither 0.08%</p> <p>Not assigned 20.99%</p>
<p>Political Opinion</p>	<p>Nationality</p> <ul style="list-style-type: none"> • British only – 39.89% (722, 353) • Irish only – 25.26% (457, 424) • Northern Irish only – 20.94% (379, 195) • British and Northern Irish only – 6.17% (111, 730) • Irish and Northern Irish only – 1.06% (19, 195) • British, Irish and Northern Irish – 1.02% (1847) • British and Irish only – 0.66% (11, 952) • Other – 5.00% (90, 543) <p>The BSO staff breakdown for political opinion is:</p> <p>Broadly Nationalist 2.04%</p> <p>Other 2.36%</p> <p>Broadly Unionist 2.44%</p> <p>Not assigned 90.02%</p> <p>Do not wish to answer 3.14%</p>
<p>Marital Status</p>	<ul style="list-style-type: none"> • 47.56% (680, 840) of those aged 16 or over were married • 36.14% (517, 359) were single • 0.09% (1288) were registered in same-sex civil partnerships • 9.43% (134, 994) were either divorced, separated or formerly in a same-sex partnership • 6.78% (97, 058) were either widowed or a surviving partner <p>BSO Workforce:</p> <p>Divorced 2.75%</p> <p>Mar/CP 52.28%</p> <p>Other 1.02%</p> <p>Seperat 1.18%</p> <p>Single 23.11%</p> <p>Unknwn 18.71%</p>

	<p>Widw/R 0.94%</p>
<p>Dependent Status</p>	<p>BSO staff data shows that:</p> <p>Dependents 7.86% Not assigned 87.58% No dependents 4.56%</p> <p>Based on the most recent official statistics:</p> <ul style="list-style-type: none"> • 13% have caring responsibilities • Approx. 70% receive no monetary reward for giving this care • 48% received help from other family members, but 38% received no support from others (Health Survey NI, 2016/17) <p>The most recent information from Carers NI suggests that:</p> <ul style="list-style-type: none"> • 24% of respondents given up work to care • 26% reduced working hours to care (CarersNI State of Caring 2017) <p>Census information shows that 238,094 households in Northern Ireland (33.9% of all NI households) have responsibility for dependent children.</p>
<p>Disability</p>	<p>BSO staff data reveal that:</p> <p>No disability 61.79% Not assigned 37.26% Disabled 0.94%</p> <p>Given that a relatively large percentage of BSO data is unassigned, population information from the NI Health Survey reveals that 42% longstanding illness (30% limiting and 12% non-limiting illness)</p> <p>Census information shows that:</p> <ul style="list-style-type: none"> • 20.69% (374, 668) regard themselves as having a disability or long-term health problem, which has an impact on their day to day activities.

	<ul style="list-style-type: none"> • 68.57% (1, 241709) of residents did not have long-term health condition. • Deafness or partial hearing loss – 5.14% (93, 078) • Blindness or partial sight loss – 1.7% (30, 785) • Communication Difficulty – 1.65% (29, 879) • Mobility of Dexterity Difficulty – 11.44% (207, 163) • A learning, intellectual, social or behavioural difficulty. 2.22% (40, 201) • An emotional, psychological - 5.83% (105, 573) or mental health condition • Long – term pain or discomfort – 10.10% (182, 897) • Shortness of breath or difficulty breathing – 8.72% (157, 907) • Frequent confusion or memory loss – 1.97% (35, 674) • A chronic illness (such as cancer, HIV, diabetes, heart disease or epilepsy) – 6.55% (118, 612) • Other condition – 5.22% (94, 527) • No Condition – 68.57% (1, 241, 709) 						
Ethnicity	<p>BSO staff data shows that</p> <table border="0"> <tr><td>Not assigned</td><td>75.00%</td></tr> <tr><td>White</td><td>24.92%</td></tr> <tr><td>Indian</td><td>0.08%</td></tr> </table> <p>Given that a large proportion of staff data is unassigned, more general population level data show that:</p> <p>1.8% 32,596 of the usual resident population belonged to minority ethnic groups,</p> <p>White – 98.21% (1, 778, 449) Chinese – 0.35% (6, 338) Irish Traveller – 0.07% (1, 268) Indian – 0.34% (6, 157) Pakistani – 0.06% (1, 087) Bangladeshi – 0.03% (543) Other Asian – 0.28% (5, 070) Black Caribbean – 0.02% (362) Black African – 0.13% (2354) Black Other – 0.05% (905) Mixed – 0.33% (5976) Other – 0.13% (2354)</p> <p>Statistics from the HSC Interpreting Service showed a large rise in requests for interpreters from 1,850 in 2004-2005 to 10, 6541 requests in 2016-2017. The most popularly requested languages are described below:</p>	Not assigned	75.00%	White	24.92%	Indian	0.08%
Not assigned	75.00%						
White	24.92%						
Indian	0.08%						

	<ol style="list-style-type: none">1. Polish 312202. Lithuanian 158663. Romanian 89754. Portuguese 83235. Arabic 62036. Slovak 53567. Tetum 53198. Chinese - Mandarin 51039. Bulgarian 342110. Hungarian 3387
Sexual Orientation	Whilst there are no accurate statistics on sexual orientation in the community as a whole, it is estimated that between 5% and 10% of people are from lesbian, gay or bisexual groups.

2.3 Qualitative Data

What are the different needs, experiences and priorities of each of the categories in relation to this policy or decision and what equality issues emerge from this? Note if policy affects both staff and service users, please discuss issues for both. Also give consideration to multiple identities (such as single parents for example).

Category	Needs and Experiences
The purpose of this policy is to ensure that the BSO meets its obligation in relation the reporting of incidents	
Gender	It recognised that there may be additional risks associated with those employees are pregnant
Age	There is no data to suggest that there are specific needs or experiences arising within this category.
Religion	There is no data to suggest that there are specific needs or experiences arising within this category.
Political Opinion	There is no data to suggest that there are specific needs or experiences arising within this category.
Marital Status	There is no data to suggest that there are specific needs or experiences arising within this category.
Dependent Status	There is no data to suggest that there are specific needs or experiences arising within this category.
Disability	Although it is recognised that people with a disability (sensory, physical and neurological conditions) may have an issue completing the BSO Manual Handling Risk Assessment Form . It has also been recognised of the possibility that for some people with a disability additional risks in the workplace apply
Ethnicity	Although it is recognised that people from minority ethnic background (regarding language barriers) may have an issue completing the form, assistance will be given by line management. Local Risk assessments will have been carried out in the employees area of work in relation to risks associated with language barriers
Sexual Orientation	There is no data to suggest that there are specific needs or experiences arising within this category.

2.4 Making Changes

Based on the equality issues you identified in 2.2 and 2.3, what changes did you make or do you intend to make in relation to the policy or decision in order to promote equality of opportunity?

<p><i>In developing the policy or decision what did you do or change to address the equality issues you identified?</i></p>	<p><i>What do you intend to do in future to address the equality issues you identified?</i></p>
<p>It is recognised that there are those with specific disabilities and needs and the organisation will take reasonable steps to assist those identified and to assist them in completing the form where possible, such as enabling the visual aid settings on the PC.</p> <p>Risk assessments will be conducted for staff who have language barriers (ie. ethnic minorities, and/ or people with sensory, physical and neurological conditions).</p> <p>Seeking to meet language and access needs for minority ethnic people and people with a disability in relation to training and awareness raising will also be important. In keeping with the BSO Accessible Formats policy, information can be translated upon request.</p>	<p>Monitor the impact on S75 groups</p>

2.5 Good Relations

What changes to the policy or decision – if any – or what additional measures would you suggest to ensure that it promotes good relations? (refer to guidance notes for guidance on impact)

<i>Group</i>	<i>Impact</i>	<i>Suggestions</i>
Religion	Nil	
Political Opinion	Nil	
Ethnicity	Nil	

(3) SHOULD THE POLICY OR DECISION BE SUBJECT TO A FULL EQUALITY IMPACT ASSESSMENT?

A full equality impact assessment (EQIA) is usually confined to those policies or decisions considered to have major implications for equality of opportunity.

How would you categorise the impacts of this decision or policy? (Refer to guidance notes for guidance on impact).

Please tick:

Major impact	
Minor impact	x
No further impact	

Do you consider that this policy or decision needs to be subjected to a full equality impact assessment?

Please tick:

Yes	
No	X

Please give reasons for your decisions:

I have considered that all issues identified will be addressed by the policy and associated actions

(4) CONSIDERATION OF DISABILITY DUTIES

4.1 In what ways does the policy or decision encourage disabled people to participate in public life and what else could you do to do so?

<i>How does the policy or decision currently encourage disabled people to participate in public life?</i>	<i>What else could you do to encourage disabled people to participate in public life?</i>
N/A	N/A

4.2 In what ways does the policy or decision promote positive attitudes towards disabled people and what else could you do to do so?

<i>How does the policy or decision currently promote positive attitudes towards disabled people?</i>	<i>What else could you do to promote positive attitudes towards disabled people?</i>
N/A	

(5) CONSIDERATION OF HUMAN RIGHTS

5.1 Does the policy or decision affect anyone's Human Rights?

Please Complete for each of the articles

ARTICLE	Yes/No
Article 2 – Right to life	No
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment	No
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour	No
Article 5 – Right to liberty & security of person	No

<i>If</i>	Article 6 – Right to a fair & public trial within a reasonable time	No
	Article 7 – Right to freedom from retrospective criminal law & no punishment without law	No
	Article 8 – Right to respect for private & family life, home and correspondence.	No
	Article 9 – Right to freedom of thought, conscience & religion	No
	Article 10 – Right to freedom of expression	Yes
	Article 11 – Right to freedom of assembly & association	No
	Article 12 – Right to marry & found a family	No
	Article 14 – Prohibition of discrimination in the enjoyment of the convention rights	No
	1 st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property	No
	1 st protocol Article 2 – Right of access to education	No

*you have answered **No** to all of the above please proceed to Question 6 on monitoring.*

5.2 If you have answered yes to any of the Articles in 5.1, does the policy or decision interfere with any of these rights? If so, what is the interference and who does it impact upon?

List the Article Number	Interfered with? Yes/No	What is the interference and who does it impact upon?	Does this raise legal issues?*
			Yes/No
Art. 10	yes	Right to freedom of expression (e.g. Wearing traditional clothes	No – Health and Safety policy will override freedom of expression (as long

		associated with a particular ethnic group or religion) may be impacted on	as there is sufficient justification)
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** It is important to speak to your line manager on this and if necessary seek legal opinion to clarify this*

5.3 Outline any actions which could be taken to promote or raise awareness of human rights or to ensure compliance with the legislation in relation to the policy or decision.

N/A

(6) MONITORING

6.1 What data will you collect in the future in order to monitor the effect of the policy or decision on any of the categories (for equality of opportunity and good relations, disability duties and human rights)?

Equality & Good Relations	Disability Duties	Human Rights
Whilst the 2011 Census information is the most current, the new HRPTS system will allow a more accurate workforce demographic figure and will be added as and when appropriate to this document	Whilst the 2011 Census information is the most current, the new HRPTS system will allow a more accurate workforce demographic figure and will be added as and when appropriate to this document	Health and safety policies can override the freedom of expression if justified, but it is important to recognise (and record accordingly) that these issues are involved.

Approved Lead Officer:

Margaret Close

Position:

Head of Corporate Services

Date:

21 May 2019

Policy/Decision Screened by:

Kieran Toale

Please note that having completed the screening you are required by statute to publish the completed screening template, as per your

organisation's equality scheme. If a consultee, including the Equality Commission, raises a concern about a screening decision based on supporting evidence, you will need to review the screening decision.

Please forward completed template to:

Equality.Unit@hscni.net

Template produced November 2011

If you require this document in an alternative format (such as large print, Braille, disk, audio file, audio cassette, Easy Read or in minority languages to meet the needs of those not fluent in English) please contact the Equality Unit:

2 Franklin Street; Belfast; BT2 8DQ; email: Equality.Unit@hscni.net;
phone: 028 90535531 (for Text Relay prefix with 18001);
fax: 028 9023 2304