

Equality and Human Rights Screening Template

The Safeguarding Board for Northern Ireland (SBNI) is required to address the 4 questions below in relation to all its policies. This template sets out a proforma to document consideration of each question.

What is the likely impact on equality of opportunity for those affected by this policy, for each of the Section 75 equality categories? (minor/major/none)

Are there opportunities to better promote equality of opportunity for people within the Section 75 equality categories?

To what extent is the policy likely to impact on good relations between people of a different religious belief, political opinion or racial group? (minor/major/none)

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

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

The Safeguarding Board for Northern Ireland Strategic Plan 2018 - 2022

1.2 Description of policy or decision

The Safeguarding Board for Northern Ireland (SBNI) is the key statutory mechanism for agreeing how the relevant organisations in Northern Ireland will cooperate to safeguard and promote the welfare of children and young people and for ensuring the coordination and effectiveness of what they do. The SBNI was established under the Safeguarding Board Act (NI) 2011. The SBNI vision is that all children and young people are seen, heard and protected in order that they grow up in safety, thrive and fulfil their potential and live as free from risk and harm as much as possible and where this does not happen, help to stop that harm and protect them from more harm.

The SBNI is an interagency partnership made up of representatives from the Health and Social Care Trusts, Health and Social Care Board, the Public Health Agency, Probation Board, the Police, Education Authority NI, District Councils, Youth Justice Agency and the Northern Ireland Guardian ad Litem service. There is also representation from the voluntary sector in Northern Ireland through the NSPCC, Barnardo’s NI, Action for Children, Include Youth, The Children’s Law Centre and Children in Northern Ireland. There is also representation from two lay members, three independent panel chairs and a GP.

The SBNI is an unincorporated statutory body and relies on the Public Health Agency (PHA) for key corporate governance and accountability arrangements.

The SBNI has developed a draft Strategic Plan for the period 2018 – 2022. This draft strategy sets out the strategic direction for the SBNI for the next four years, taking into account the vision and priorities set out by the SBNI Board.

The draft Strategic Plan details our purpose, focus and outcomes and is a high level document setting out the mission, direction and priorities for the SBNI over the next four years. The draft Strategic Plan will be supported by annual business plans enabling the SBNI to incorporate new priorities and challenges that may arise over this period. It is the key core accountability tool, along with our Annual Assurance statement for the Department of Health (DoH).

The SBNI will deliver on its mission and vision based on the following four strategic

priorities:

- To provide leadership and set direction in the safeguarding and protection of children
- To provide a voice to children and young people affected by domestic and sexual violence and abuse
- To improve outcomes for children and young people affected or potentially affected by neglect by ensuring the prevention, early recognition and improvement of agency responses
- To provide a voice for children and young people affected by mental health issues.

All of this is underscored by an agreed corporate value base that places children and young people at the heart of what we do.

The current context of restricted finances and upcoming health and social care reform must be noted as potential constraints for this strategy. Both of these have been considered throughout the strategic planning development process.

1.3 Main stakeholders affected (internal and external)

For example staff, actual or potential service users, other public sector organisations, voluntary and community groups, trade unions or professional organisations or private sector organisations or others

Internal:

- SBNI Independent Chair
- SBNI Professional Officers (X2)
- SBNI Office Manager/Board Secretary
- SBNI Central Support Staff (X3)
- SBNI Member Agencies
- SBNI Case Management Review Panel Chair
- SBNI Safeguarding Panel Chairs (X2)
- those agencies who sit on Safeguarding Panels
- those whose services are commissioned by SBNI
- SBNI partner agencies.

External:

- Children and young people, their families and carers
- Wider Public
- Department of Health (as the SBNI sponsor department)
- Public Health Agency (as the SBNI corporate host).

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

- The Safeguarding Board Act (NI 2011)
- Data Protection Act 1998
 - Schedule 2 – especially paragraphs 3, 4, 5(a), 5(b), 6 (1)
 - Schedule 3 - especially paragraphs 2(1), 3, 6, 7(1)
- Access Health Records Order 1993
- The Freedom of Information Act 2000
- Common Law Duty of Confidentiality
- Human Rights Act 1998, (Articles 2, 3 & 8 of the ECHR)
- United Nations Convention on the Rights of the Child 1989
- Police (NI) Act 2000
- Children (Northern Ireland) Order 1995
- Housing (Amendment) Act (Northern Ireland) 2011
- Criminal Law (Northern Ireland) Act 1967 (see Appendix 2)
- The Probation Board (Northern Ireland) Order 1982
- Information Commissioners Office ico.org.uk BMA Ethics Access to health records Guidance for health professionals in the United Kingdom August 2014 www.bma.org.uk/ap.nsf/Content/accesshealthrecords
- Protecting children and young people: the responsibilities of all doctors General Medical Council www.gmc-uk.org/
- Her Majesty's Government '*working well together to Safeguard Children*'
- Information Sharing: *Advice for practitioners providing safeguarding services to children, young people, parents and carers*
- The Safeguarding Board (Northern Ireland) Act 2011.

This strategy has been informed in particular by the following:

European Context:

- European Union Agenda for the Rights of the Child 2011

Northern Ireland Context:

- Northern Ireland Executive Programme for Government Framework 2016 - 2021
- DHSSPS May 2015 - Co-operating to Safeguard Children and Young People in Northern Ireland Policy Document, amended August 2017
- OFMDFM 2006 – Our children and young people, our pledge: a 10 year strategy for children and young people
- OFMDFM 2009 – Safeguarding children: a cross-departmental statement on the protection of children and young people
- OFMDFM 2013 – Synopsis of actions within the public sector to enhance child internet safety
- SBNI Strategic Plan 2013 - 2017
- SBNI Guidance to the Safeguarding Board for Northern Ireland 2014

- SBNI – An exploration of e-Safety messages to young people, parents and practitioners in Northern Ireland
- SBNI Child Safeguarding Learning and Development Strategy and framework 2015 – 2018
- OFMDFM Racial Equality Strategy 2015 - 2025

(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.

- 2011 Census published by the Northern Ireland Statistics and Research Agency
- Previous Strategic Plan, Annual Business Plans
- Northern Ireland Statistical Research Agency Mid-Year Population Statistics 2016
- Department of Health Children’s Social Care Statistics 2016/2017
- Department of Health Quarterly Child protection Statistics for NI (July to September 2017)
- Electoral Office NI

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.

There are 435,567 children living in Northern Ireland (Mid-Year estimate 2016, NISRA 2017). At 31 March 2017, 22,737 of these were known to social services as a child in need.

Category	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?
Gender	<p>General Population Data NI Population Statistics</p> <p>Population of Northern Ireland in 2016 was 1,851,600 Male = 49% Female = 51% Children (Aged 0-17): 433,161 (23%)</p> <p>Of the children in need at 31 March 2017, 55% were male and 45% were female. This gap is slightly larger than the gender split in the general child population above.</p>

	<p>Reed et al. 2009: 8/100000 (115) transgender people in NI. “Research (McBride, Ruari-Santiago (2011): Healthcare Issues for Transgender People Living in Northern Ireland, Belfast).suggests:</p> <ul style="list-style-type: none"> • 140-160 individuals are affiliated with transgender groups • 120 individuals have presented with Gender Identity Dysphoria • there are more trans women than trans men living in Northern Ireland.”
Age	<p>General Population Data NI Population Statistics</p> <p>Children 0-4 years 124,400 - 6.87% of the total population 5 to 9 years – 111,300 - 6.15% 10 to 14 years - 119,000 – 6.57% Young people 15 to 19 years- 126,200 – 6.97% Total under 19 years 480,900 – 26.56%</p> <p>Older People People over 60 in N Ireland now make up 19% of the population (Census 2011). The number of people aged over 85 years makes up 1.73% of the population (Census 2011). Pensioner poverty is increasing; there is a link between poverty and inequality.</p> <p>Overall NI Age Profile 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) 90 and over - 0.56% (10, 141)</p>
Religion	<p>NI Population Statistics</p> <p>Catholic - 45.14% Protestants - 48.36% Other - 0.91% Unknown - 5.59%</p> <p>Religious affiliation was not recorded, not known or refused to be disclosed for over a fifth of all children (22%). 33% reported their religion</p>

	<p>as Roman catholic, 37% were other Christian and non-Christian denominations and faiths and 4% had no religious beliefs. [Children Social Care Stats 2016/2017]</p>
Political Opinion	<p>Electoral Office Northern Ireland</p> <p>There are 1,210,009 people in NI registered to vote on the electoral register. 55.71% of those eligible to vote did so in the NI Assembly election in 2011. Of these 43.21% voted Unionist as their first preference vote, 41.18% voted Nationalist / Republican as first preference and approx. 15% Other.</p>
Marital Status	<p>NI Population Statistics</p> <p>Almost half (48%) of people aged 16 years and over on Census Day 2011 were married, and over a third (38%) were single. Just over 1,200 people (0.1%) were in registered same-sex civil partnerships in March 2011. A further 9.4% of usual residents were either separated, divorced or formerly in a same-sex civil partnership, while the remaining 6.8% were either widowed or a surviving partner. In 2008, 121 people aged 16-19 years old were married in Northern Ireland (Northern Ireland Statistics Agency)</p>
Dependent Status	<p>NI Population Statistics</p> <p>Out of a total of 703,275 households the following break-down was found on Census Day 2011:</p> <p>Married or in a registered same-sex civil partnership:</p> <ul style="list-style-type: none"> With no children = 10.28% With dependent children = 19.72% Children non-dependent = 8.31% <p>Co-habiting couple:</p> <ul style="list-style-type: none"> With no children = 2.92% With dependent children = 2.3% All children non-dependent = 0.26% <p>Lone Parent:</p> <ul style="list-style-type: none"> With dependent children = 9.13% All children non-dependent = 5.12% <p>Other household types:</p> <ul style="list-style-type: none"> With dependent children = 2.7% <p>In summary, in 2011, one-third (34%) of households contained dependent children, down from 36% in 2001.</p> <p>A dependent child is a person in a household aged 0-15 (whether or not in a family) or a person aged 16-18 who is a full-time student and in a family with</p>

	<p>parent(s). There are 13.8 million dependent children living in families in the UK in 2015 (National Statistics, 2015)</p> <p>Based on the most recent information from Carers Northern Ireland, the following facts relate to carers.</p> <ol style="list-style-type: none"> 1. 1 in every 8 adults is a carer 2. There are approximately 207,000 carers in Northern Ireland 3. Any one of us has a 6.6% chance of becoming a carer in any year 4. Carers save the Northern Ireland economy over £4.4 billion a year - more than the annual NHS spending in Northern Ireland. 5. The main carers' benefit is worth just £55.55 for a minimum of 35 hours - £7.94 per day 6. One quarter of all carers provide over 50 hours of care per week 7. People providing high levels of care are twice as likely to be permanently sick or disabled than the average person 8. Approximately 30,000 people in Northern Ireland care for more than one person 9. 64% of carers are women; 36% are men 10. By 2037 the number of carers could have increased to 400,000 <p>This information can be accessed at info@carersni.org – June 2011.</p> <p>The recent Carers Rights Day Report, Missing Out: The identification challenge³³ highlighted that 58% of carers here took over a year to identify themselves as carers, 29% took over 5 years and 13% took over 10 years. This means that carers here are losing out on the practical, emotional and financial supports available to them, including services provided by health and social care trusts.</p> <p>A recent Carers NI State of Caring survey highlighted that:</p> <ul style="list-style-type: none"> • 51% carers have let a health problem go untreated • 50% carers say their mental health has gotten worse • 31% only get help when it's an emergency
Disability	<p>NI Population Statistics</p> <p>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.</p> <p>68.57% (1, 241,709) of residents did not have a long – term health condition.</p> <p>Deafness or partial hearing loss – 5.14% (93, 078)</p> <p>Blindness or partial sight loss – 1.7% (30, 785)</p>

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 or mental health condition - 5.83% (105, 573)

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)

Just over one in five of the usually resident population (300,000 - 21%) had a long-term health problem or disability which limited their day-to-day activities. In response to a similar question in 2001, 20% had a long term illness, health problem or disability which limited their daily activities or the work they can do. Children with Disabilities in general are at greater risk of all forms of abuse and are particularly vulnerable to CSE. It is reported that a high proportion of young people referred to Barnardo’s NI Safe Choices Project have some level of learning disability.

Of the 22,737 children in need in Northern Ireland, 20% were recorded as having a disability and almost half of these had a learning disability.

Child protection

For those that were allocated for further action, the majority related to a carer who needed support to give appropriate care for the child (76%), 21% related to child protection investigations and 2% related to a child with disability (Nation Statistics).

Having a disability was more prevalent amongst the male children in need, with 21% of males being recorded as having a disability compared with 11% of the female children in need. Furthermore, each of the disability categories had more males than females. This was most evident amongst those recorded as having Autism, where 79% were males. This parallels recent research indicating that autism is more prevalent amongst males than females of school age in Northern Ireland

Children in need

Of the 23,834 children in need in Northern Ireland, 17% were

	<p>recorded as having a disability. Almost half of these had a learning disability (Children Social Care Stats 2014/2015) In 2015, 4031 children in need have a disability in Northern Ireland. 48% of these have a learning disability, 30% has Autism, 12% have physical disabilities, 7% have sensory disabilities and 2% have other disabilities (CSCS).</p> <p>Barnardo's 2016 'It's not on the Radar' document found that Children and young people with a disability are three times more likely to be abused than children without a disability. Within this group, children with behaviour or conduct disorders are particularly vulnerable. Learning difficulties or delayed development may be a consequence of trauma or sexual abuse. Due to a young child being abused and/ or neglected from a young age could relate to problems in their development leading to them being Learning disabled.</p>
Ethnicity	<p>NI Population Statistics</p> <p>According to the OFMDFM Racial Equality Strategy 2015 – 2025, figures from the 2011 Census showed the diverse nature of the minority ethnic population in Northern Ireland with over 32,000 giving their ethnicity as something other than 'white', equating to approximately 1.7% of the Northern Irish population.</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>Language (Spoken by those aged 3 and over); English – 96.86% (1, 681, 210) Polish – 1.02%(17, 704) Lithuanian – 0.36% (6, 249) Irish (Gaelic) – 0.24% (4, 166) Portuguese – 0.13% (2, 256) Slovak – 0.13% (2, 256) Chinese – 0.13% (2, 256) Tagalog/Filipino – 0.11% (1, 909)</p>

	<p>Latvian – 0.07% (1, 215) Russian – 0.07% (1, 215) Hungarian – 0.06% (1, 041) Other – 0.75% (13, 018)</p> <p>Child in need As with religion, ethnic background was not recorded for almost one fifth of the children in need (17%), with 78% of children in need recorded as White and a further 5% from Ethnic minorities (including Irish travellers, Roma Travellers, Asian, Black and those of mixed ethnicity). [Children Social Care Stats 2016/2017]</p>
<p>Sexual Orientation</p>	<p>It is estimated that one in ten people in NI are from Lesbian, Gay, Bisexual and Transgender groups.</p> <p>McClenahan, Simon (2012): Multiple identity; Multiple Exclusions and Human Rights: The Experiences of people with disabilities who identify as Lesbian, Gay, Bisexual and Transgender people living in Northern Ireland. Belfast: Disability Action.</p> <p>“The general view in Northern Ireland among LGB&T organisations, service providers and policy makers is that an estimated 6% to 10% of the population identifies as lesbian, gay, bisexual and transgender.”</p> <p>Note- sources do not provide figures solely on those persons who identify as lesbian, gay and bisexual and so the above percentage is a slight overestimate.</p>

NI populations statistics provided by NISRA from 2011 Census unless indicated otherwise

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.

<i>Category</i>	<i>Needs and Experiences</i>
Gender	<p>The SBNI Strategic Plan 2018 - 2022 is a high level document which sets out the strategic direction of the organisation over the next four years. This strategy will be supported by annual business plans, work programmes, policies and business cases as appropriate. The plan covers a wide range of issues across safeguarding and promoting the welfare of children and young people in Northern Ireland. The direction set out in the plan is closely aligned with the core functions of the SBNI as defined by legislation and with other key strategies, including the NI Executive draft Programme for Government Framework.</p> <p>The SBNI recognises that the needs, experiences and priorities of the groups within each Section 75 category may vary substantially in relation to the work emanating from this strategic plan. A top level screening of the draft strategy will not do justice to giving consideration to the needs of all the Section 75 groups. Therefore the SBNI is committed to undertaking, where appropriate, the screening of associated pieces of work as they are taken forward, for example business plans.</p> <p>When associated annual business and work plans fall out of this high level strategy, the SBNI gives a commitment to considering in detail the equality issues that may affect the equality groups in respect of these particular products. At this juncture the SBNI feels that the following will need to be considered in respect of the screening of the products relating to domestic and sexual violence and abuse, child mental health and neglect:</p> <ul style="list-style-type: none"> • Engagement and communication issues for older and younger children (to include those with disability) • Gender appropriate engagement and communication channels for males and females <p>Additionally, some people with a disability may require the draft Strategy to be written in plain English or other medium.</p>
Age	
Religion	
Political Opinion	
Marital Status	
Dependent Status	
Disability	
Ethnicity	
Sexual Orientation	

2.4 Multiple Identities

Are there any potential impacts of the policy or decision on people with multiple identities? For example; disabled minority ethnic people; disabled women; young Protestant men; and young lesbians, gay and bisexual people.

Please also see the comments at the start of 2.3

It is possible that some of the work taken forward under the priorities and aims set out in the Strategic Plan may impact on people with multiple identities. The SBNI recognises that the needs and experiences of people with multiple identities will vary across our work.

In our commitment to ensuring that potential impacts are considered and mitigated, the SBNI will screen policies and strategies individually to ensure that the potential impacts of each policy or strategy are considered fully in that context.

2.5 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?

<i>In developing the policy or decision what did you do or change to address the equality issues you identified?</i>	<i>What do you intend to do in future to address the equality issues you identified?</i>
<p>The draft strategy has been written in a manner to make it accessible to a wide group of stakeholders and the general public.</p> <p>Where specific priorities and aims result in products being commissioned and created, the SBNI will ensure that such relevant work will be screened.</p>	<p>The SBNI is committed to undertaking where appropriate the screening of associated pieces of work as they are taken forward, including for example annual business plans, work programmes, policies and business cases over the next four years.</p> <p>Specifically, these relate to strategic priorities 1 and 3, setting leadership and direction and early intervention in neglect, as these are owned by the SBNI. Regarding the 2 other priorities, regarding prevention and early intervention of domestic violence and abuse and children with mental health, these will be</p>

<p>When preparing the Strategic Plan 2018 - 2022, we took the opportunity to review our mission, vision and values to ensure their continued relevance to our work and our population.</p> <p>An easy read version of both the draft consultation and final plan will be developed</p>	<p>realised through engagement and participation with other established forums.</p> <p>In these instances, the SBNI will undertake to ensure equality issues in relation to the equality groupings are raised in respect to children and young people.</p> <p>The SBNI is committed to screening its communications and engagement strategy during the development process.</p> <p>The SBNI will strengthen data gathering and analysis so that its objectives and priorities will be intelligence led. The SBNI will consider the feasibility of collecting Section 75 monitoring data.</p>
--	--

2.6 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)

Group	Impact	Suggestions
Religion	Tackling any inequalities in the safeguarding and promoting the welfare of children and young people will help promote equality of opportunity and good relations.	Continued focus on partnership working and public participation where appropriate.
Political Opinion	Tackling any inequalities in the safeguarding and promoting the welfare of children and young people will help promote equality of opportunity and good relations.	Continued focus on partnership working and public participation where appropriate.
Ethnicity	Tackling any inequalities in the safeguarding and promoting the welfare of children and young people will help promote equality of opportunity and good relations.	Continued focus on partnership working and public participation where appropriate.

--	--	--

(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	<input type="checkbox"/>
Minor impact	<input checked="" type="checkbox"/>
No further impact	<input type="checkbox"/>

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

Please tick:

Yes	<input type="checkbox"/>
No	<input checked="" type="checkbox"/>

Please give reasons for your decisions.

The SBNI Strategic Plan 2018 – 2022 sets out the focus and direction of the SBNI over the next four years from 1 April 2018.

The plan covers a wide range of issues across the safeguarding and protection of children landscape in Northern Ireland. It has the aim of improving the safeguarding and promotion of the welfare of children and young people by ensuring all member and partner agencies work together in partnership to prevent and protect them from risk and harm.

The SBNI recognises the need to consider the impact on Section 75 groups of this draft strategy and subsequent policies and programmes of work. The needs, experiences and priorities of these groups will vary and annual business plans, work programmes, policies and business cases will be equality screened as appropriate as they are developed and taken forward over the next four years.

Therefore a full Equality Impact Assessment is not required at this stage.

(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>

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>

(5) CONSIDERATION OF HUMAN RIGHTS

5.1 Does the policy or decision affect anyone's Human Rights? 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
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	No
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

*If you have answered no to all of the above please move on 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

** 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.

(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
Monitoring data will be identified through screening of work streams emanating from the draft Strategy	Monitoring data will be identified through screening of work streams emanating from the draft Strategy	Monitoring data will be identified through screening of work streams emanating from the draft Strategy

Approved Lead Officer: Helen McKenzie

Position: Professional Officer

Date: 09 January 2018

Policy/Decision Screened by: Paul McNeill

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

Business Services Organisation's Equality Unit:

2 Franklin Street; Belfast; BT2 8DQ;

email: Equality.Unit@hscni.net

Phone: 028 9536 3961 (for Text Relay prefix with 18001); fax: 028 9023 2304