

Equality, Good Relations and Human Rights SCREENING

The Health and Social Care Board is required to consider the likely equality implications of any policies or decisions. In particular it is asked to consider:

- 1) 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 or none)
- 2) Are there opportunities to better promote equality of opportunity for people within the Section 75 equality categories?
- 3) 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 or none)
- 4) Are there opportunities to better promote good relations between people of a different religious belief, political opinion or racial group?

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.

As part of the audit trail documentation needs to be made available for all policies and decisions examined for equality and human rights implications. The screening template is a pro forma to document consideration of each screening question.

For information (evidence, data, research etc) on the Section 75 equality groups see the Equality and Human Rights Information Bank on the BSO website:

<http://www.hscbusiness.hscni.net/services/1798.htm>

Equality, Good Relations and Human Rights SCREENING TEMPLATE

(1) INFORMATION ABOUT THE POLICY OR DECISION

1.1 Title of policy or decision

Procurement of Prison Optometry Services

1.2 Description of policy or decision

- **what is it trying to achieve? (aims and objectives)**

Through a competitive tendering process, to secure a formal contract with providers to deliver optometry services across all NI prison sites.

- **how will this be achieved? (key elements)**

Agreement on a service specification, inviting tenders for the service provision and appointing a successful bidder against agreed criteria. Prisoners will continue to access the service through requests to prison health care services.

- **what are the key constraints? (for example financial, legislative or other)**

Time frame (before April 2021)

Current financial envelope for the service

Availability of HSCB/SET/BSO staff to complete the tendering exercise

Suitable applicants apply

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

Current optometrists providing the service
Prison population (new and current users)

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

- **what are they?**

Procurement rules and regulations

- **who owns them?**

BSO

(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.

Engagement and consultation with current providers and staff in NIPS, SET and BSO.

NIPS (2020) Analysis of NIPS Prison Population from 1/10/2018 to 31/12/2019. Available at <https://www.justice-ni.gov.uk/sites/default/files/publications/justice/060%20Population%20Snapshot%202020-01-01-05-00-13.pdf>

DoJ and NISRA Northern Ireland Prison Population 2018/19 Infographics. Available at <https://www.justice-ni.gov.uk/sites/default/files/publications/justice/ni-prison-population-2018-19-Infographics-2018-19.pdf>

DoJ Analytical Services Group. The Northern Ireland Prison Population 2019/20.

Available at <https://www.justice-ni.gov.uk/topics/doj-statistics-and-research>

DoH and DoJ (2019) Improving Health Within Criminal Justice: A Strategy and action plan to ensure that children, young people and adults in contact with the criminal justice system are healthier, safer and less likely to be involved in offending behaviour. Available at Strategy. Available at <https://www.health-ni.gov.uk/sites/default/files/publications/health/Improving-Health-Within-Criminal-Justice-Strategy-June-2019.pdf>

[2011](#) Census data.

Northern Ireland Life and Times, 2018. Available at: https://www.ark.ac.uk/nilt/2018/Political_Attitudes/UNINATID.html

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.

Category	<i>What is the makeup of the affected group? (%) Are there any issue or problems? For example, a lower uptake that needs to be addressed or greater involvement of a particular group?</i>
Gender	<p>In 2019/20 the average daily prison population was 1516 persons. 95 % of the prison population is male (1442) with the remaining 5% (74) of the population, female.</p> <p>The number of receptions into prison in 2019/20 was 5,322 in 2019/20 made by 2,961 prisoners</p> <p>4,913 of these receptions were male and 409 were female.</p>
Age	<p>In 2019/20 prisoners aged between 30 to 39 years of age made up the largest age group of the average daily immediate custody prison population (34.4%; 350),</p> <p>The proportion of those aged between 18 and 20 years of accounted for 3.1% (32) of the total population during 2019/20. 7% of prisoners were over 60 years of age.</p> <p>18-20 years 3% 21-29 years 29% 40-49 years 18% 50-59 years 9% 60+ years 7%</p>
Religion	<p>Census data shows that of the general NI population:</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>(Census 2011)</p>

<p>Political Opinion</p>	<p>A recent survey of the NI population, published in 2018, explored political opinion. People were asked “Generally speaking, do you consider yourself as a unionist, a nationalist or neither?” Of those that responded to the survey, 26% generally considered themselves to be Unionist; 21% said they were Nationalist; 50% said Neither Unionist nor Nationalist; and 1% said “Other”. 2% said they didn’t know (Northern Ireland Life and Times, 2018)</p> <p>However, the majority of prisoners are from lower socio-economic groups and more deprived geographical areas characterised by higher levels of political violence. Given this, it is likely that there will be more prisoners who identify as either Nationalist or Unionist, and fewer who identify as “neither”.</p>
<p>Marital Status</p>	<p>General population data from the most recent census shows that:</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>(Census 2011)</p> <p>However, given the younger age profile of the prison population, it is likely that fewer of these will be widowed, and a higher proportion that the general population will be single.</p>
<p>Dependent Status</p>	<p>Census data suggests that:</p> <ul style="list-style-type: none"> • 11.81% (213, 863) of the usually resident population provide unpaid care to family members, friends, neighbours or others because of long-term physical or mental ill – health/disabilities or problems related to old age. • 3.11% (56, 318) provided 50 hours care or more. • 33.86% (238, 129) of households contained dependent children. • 40.29% (283, 350) contained a least one person with a long – term health problem or a disability. <p>(Census 2011)</p> <p>NI Lone parent families = 115,959, with 123,745 dependent children in family (Census 2011).</p>

	However, all of the prison population who have dependent children are classified as an “absent parent”.
Disability	Research suggests that the prisoner population are more likely than the general population to experience issues like mental ill health, personality disorder, learning disability or difficulties, speech, language and communication difficulties and problems with drugs and alcohol.
Ethnicity	Data held by NIPS.in December 2019 identifies 175 foreign nationals in NI prisons. 57 were sentenced and 118 were awaiting sentence.
Sexual Orientation	There are no official statistics on the sexual orientation of the population. However, it is estimated that 1 in 10 people identify as something other than heterosexual. This equates to approximately 150 people out of the overall average NI daily prison population (1516).

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.

Category	Needs and Experiences
Gender	No differing need identifies for this group
Age	Older prisoners tend to have more health problems than younger prisoners, and than older people in the general population.
Religion	No differing need identifies for this group
Political Opinion	No differing need identifies for this group
Marital Status	No differing need identifies for this group
Dependent	No differing need identifies for this group

Status	
Disability	A number of vulnerable groups are over-represented in the prison population when compared with the national average, including those with mental ill health, personality disorder, learning disabilities, which can involve speech, language and communication difficulties. These individuals may experience particular in terms of communication, participation, access and welfare.
Ethnicity	Provision for foreign nationals may include language and cultural barriers, access to health records and social support and networks in and outside of custody.
Sexual Orientation	We do not have clear data on the numbers of people from the LGB community in contact with the CJS in Northern Ireland. Research suggests that issues affecting people from the LGBT community within custody may include isolation, harassment or physical abuse.

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.

None identified.

2.5 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</i>	<i>What do you intend to do in future to address the equality issues you identified?</i>
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<i>identified?</i>	
<p>Age and Disability: The proposed optometry service will manage waiting times to ensure they are kept to a minimum through the proactive management of demand and capacity, and implementation of a flexible and reactive appointment system to help meet the needs of older prisoners and those with certain mental health conditions and learning disabilities.</p> <p>The service will provide advice as appropriate, Promotion of public health and ophthalmic public health messages including prevention and early detection information will be provided also. Easy read material could be provided for prisoners with learning difficulties.</p> <p>Staff training could be developed to raise awareness of the service in prison.</p> <p>Ethnicity: The needs of minority ethnic groups could be met through the provision of multilingual written material and/or access to interpreting services. Also, eye tests will be included as part of the service should patient health care records be unavailable. Optometric assessment to include the assessment of; refractive, oculo-motor and ocular health and the provision of all clinical tests to enable and support assessment.</p> <p>Sexual orientation: Staff training could</p>	<p>It is recognised that there may be equality issues that have yet to be identified and addressed. Through regular questionnaires/verbal feedback, the provider(s) will be expected to monitor the quality of service provided to all sections.</p>

be developed to raise awareness of the service in prison. All bidders will be required to consider what actions will need to be taken forward to ensure they provide an equitable service to all.	
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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	none	
Political Opinion	none	
Ethnicity	none	

(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	<input checked="" type="checkbox"/>
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Do you consider that this policy or decision needs to be subjected to a full equality impact assessment?

Please tick:

Yes	<input type="checkbox"/>
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No	√
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Please give reasons for your decisions.

No known equality issues with current service which is being replaced with a commensurate service.

(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>
Not applicable	

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>
Not applicable	

(5) CONSIDERATION OF HUMAN RIGHTS

5.1 Are Human Rights relevant?

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 onto to 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 have a potential positive impact or does it potentially interfere with anyone’s Human Rights?

List the Article Number	Positive impact or potential interference?	How?	Does this raise any 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.

None.

(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
NIPS data	NIPS data	NI PS data

Approved Lead Officer: _____

Position: _____

Policy/Decision Screened by:

Signed:

Date: _____

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**

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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:

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phone: 028 95363961 (for Text Relay prefix with 18001); fax: 028 9023
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