Patient and Client Council

Your voice in health and social care

Equality and Human Rights Screening Template

The Patient and Client Council is required to address the 4 questions below in relation to all its policies.

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 <u>Guidance Notes</u> 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

Reasonable Adjustments and Special Consideration Policy

1.2 Description of policy or decision

Aims & Objectives

As part of the project to develop a model for remunerating lived experience in co design/coproduction, the Patient and Client Council (PCC) has committed to delivering three main outcomes;

- 1. Develop systems and processes for a recruitment and payment system for members of the public to be paid for their involvement work.
- 2. Provide peer mentoring for new recruits to ensure effective co-design/co-production.
- 3. Provide reciprocal recognition for service users and carers who are working with the HSC on a personal capacity or on behalf of a group on dedicated or commissioned work, such as Co-design teams, Co-delivery of Peer work, and community services.

In order to fulfil outcomes 1 & 2, the PCC plan to become a learning centre with the Open College Network NI (OCN) to deliver an endorsed bespoke programme to train recruits and other interested parties in effective engagement & coproduction. The aim of this policy is to communicate the commitment of the Chief Executive, Board of Directors and Executive Management Team to the promotion of equality of opportunity in and by the Patient & Client Council (PCC) in respect of training and learning. In addition to Access to Fair Assessment the PCC operate a policy on reasonable adjustments and special considerations.

This policy sets out the procedures that employees and learners must follow when implementing reasonable adjustments and special considerations in respect of the PCC's training provision.

How this will be achieved;

A reasonable adjustment in the context of assessment is an adjustment that helps to reduce the effect of a disability or difficulty that places a learner at a substantial disadvantage in the assessment situation. Special consideration in the context of assessment is where consideration is given to circumstances that occur just prior to or during assessment that place the learner at a disadvantage.

In the first instance reasonable adjustments must be agreed by the Tutor/Assessor and Internal Verifier prior to assessment commencing. A learner does not have to be disabled (as defined by the Disability Discrimination Action 1995; Protection against disability discrimination Inidirect) to qualify for reasonable adjustment; nor will every learner who is disabled be entitled to reasonable adjustment.

A special consideration is consideration given to a learner who was prepared for and present for assessment but who may have been disadvantaged by temporary illness, injury or adverse circumstances that have arisen at or near the time of assessment.

A special consideration can be considered when their performance may be affected by circumstances beyond their control. Examples of such circumstances may be;

- recent personal illness
- accident
- bereavement
- serious disturbance during the assessment
- the alternative assessment arrangements which were agreed in advance of the assessment proved inappropriate or inadequate
- any part of an assessment has been missed due to circumstances beyond the control of the learner.

Key Constraints

Reasonable adjustments are intended to help reduce the effect of a disability or difficulty but must not affect the validity or reliability of the assessment outcomes or give a learner an unfair advantage.

Allowing a request for reasonable adjustment must be made dependent upon how it will facilitate access for the learner. A reasonable adjustment is intended to allow access to assessment but can only be granted where the adjustment does not;

- affect the validity or reliability of the assessment;
- give the learner(s) in question an unfair advantage over other learners taking the same or similar assessment;
- influence the final outcome of the assessment decision.

The PCC Tutor/Assessor and Internal Verifier must ensure that reasonable adjustments are transparent and unbiased, recorded on relevant documentation and kept on record in accordance with the Retention of Learner Records Policy.

A special consideration cannot give a learner an unfair advantage but can be considered when their performance may be affected by circumstances beyond their control. The PCC Tutor/Assessor must submit a written Special Consideration request to the Awarding Organisation. All applications for special consideration can only be made on a case-by-case basis and thus separate applications must be made for each learner.

Learners may apply for special consideration during or after an assessment but may not apply for special consideration in the case of a permanent disability or learning difficulty. The scale of the adjustment will depend on the circumstances during the assessment and will be reflective of the difficulty faced by the learner. Requests for special consideration must comply with the Awarding Organisation's terms and conditions and applications for special consideration made according to the Awarding Organisation's procedures.

1.3 Main stakeholders affected (internal and external)

Internal

Staff responsible for programme delivery, assessment of internal verification

- Enrolled Coproduction Associates (those recruited through the purpose designed recruitment and payment system)
- Enrolled PCC Engagement Platform members
- Enrolled PCC Members

External

- Enrolled learners from Community and Voluntary Sector
- Enrolled learners from HSC

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

The Northern Ireland Programme for Government

Health and Wellbeing 2026- Delivering Together

Co-Production Guide for Northern Ireland - Connecting and Realising Value

Through People

Regional HSC Strategies

OCN Assessment Requirements

OCN Internal Verification Requirements

OCN Appeals Policy

OCN Reasonable Adjustments and Special Considerations Policy

OCN Terms and Conditions for Centre Approval

PCC Internal Verification Policy

PCC Employment Equality of Opportunity Policy

PCC Centre Contingency Plan

BSO Complaints Policy

(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.

- NISRA Mid-Year Population Reports and Census data
- PCC (2019) Exploring Paid Service User/Carer Involvement in Health and Social Care Settings
- PHA (2017) Personal and Public Involvement (PPI) and its impact
- GIRES (2014) The Number of Gender Variant People in the UK
- CarersNI (2021) State of Caring 2021 Report (UK wide, including NI)
- Carers NI (2021) State of Caring in Northern Ireland.
- Carers NI (2022) Carers Week Report
- Health Survey 2019-20
- Annual enrolments at schools and in funded pre-school education in Northern Ireland 2020-21.
- HSC Interpreting Service Annual Reports
- Office for National Statistics National Debate on Measuring National Wellbeing
- ONS (2016) Labour Force Survey
- PCC Staff monitoring data June 2021
- Learning and Work Institute (20201) Working Together-How learning and skills support can create an inclusive labour market in 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. Also give consideration to multiple identities.

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	PCC Staff; Male: 21.43% Female: 78.57%		
	Other; At 30 June 2020, Northern Ireland's population was estimated to be 1.90 million people. Just over half of the population (50.7 per cent) were female, with 961,400 females compared to 934,200 males (49.3 per cent).		
	The Gender Identity Research and Education Society (GIRES) estimate the number of gender nonconforming employees and service users, based on the information that GIRES assembled for the Home Office (2011) and subsequently updated (2014):		
	 gender variant to some degree 1% have sought some medical care 0.025% having already undergone transition 0.015% 		
	 Applying GIRES figures to NI population (using NISRA mid-year population estimates for June 2019) N=1,881,600 (approx.): 18,816 people who do not identify with gender assigned to them at birth 470 likely to have sought medical care 282 likely to have undergone transition. 		
Age	PCC Staff;		
	•25-29 - 7.14%		
	•30-34 - 21.43%		
	•35-39 - 14.29%		
	•40-44 - 14.29%		
	•45-49 - 17.86%		
	•50-54 - 7.14%		

	•55-59 - 17.86%		
	•60-64 - 0.00%		
	•>=65 - 0.00%		
	Other;		
	15-19 years 5.95%		
	20-24 years 5.85%		
	25-29 years 6.12%		
	30-34 years 6.62%		
	35-39 years 6.69%		
	40-44 years 6.42%		
	45-49 years 6.39%		
	50-54 years 6.88%		
	55-59 years 6.79%		
	60-64 years 5.94%		
	65-69 years 4.91%		
	70-74 years 4.39%		
	75-79 years 3.49%		
	80-84 years 2.30%		
	85-89 years 1.36%		
	90+ years 0.71%		
Religious Belief	PCC Staff; Perceived Protestant- 3.57% Protestant- 17.86% Perceived Roman Catholic- 7.14% Roman Catholic- 28.57% Neither- 10.71% Perceived Neither- 0.00% Not assigned- 32.14% Other; Catholic 42.31% Church of Ireland 11.55%		

Dependent Status

PCC Staff;
Yes 17.86%
Not assigned 67.86%
No 14.29%

Other;

In March 2011, 64,000 households in Northern Ireland were headed by a lone parent with dependent children. While the total number of households in Northern Ireland increased by 12 per cent over the decade, from 626,700 in 2001 to 703,300 in 2011, the number of lone parent households with dependent children increased by over a quarter (27 per cent) during the same period, from 50,600 in 2001. Belfast West contains the highest proportion of lone parent households (19 per cent of all households), followed by Foyle (15 per cent) and Belfast North (14 per cent). The lowest proportion of lone parent households, are in Belfast South (6.3 per cent), North Down (6.6 per cent) and Fermanagh and South Tyrone (6.7 per cent).

Based on the most recent information from Carers Northern Ireland, the following facts relate to carers; •20% of NI 18+ population are currently providing unpaid care.

- •At the time this research was undertaken, in May 2022, women are much more likely to be caring (23%) with 19% caring since before the pandemic and 4% since the pandemic started.
- •The peak age of caring is 55-64 with 29% of adults providing care and 22% of people aged over 65 were providing unpaid care. 14% of younger adults aged 18 to 24 were providing unpaid care.
- •65% of carers are spending their own money on care, support services or products for the person they care for. The average monthly spend for carers in Northern Ireland is £120 and with high

rates of inflation and a rising cost of living, this extra spend is likely to further disadvantage carers financially.

•29% of carers in Northern

Ireland said they were struggling to make ends meet. A further 17% are or have been in debt as a result of caring and 4% cannot afford utility bills such as electricity, gas, water or telephone bills

Disability

PCC Staff:

No	39.29%
Not assigned	57.14%
Yes	3.57%

Other;

More than one person in five (300,000) people in Northern Ireland has a disability. The incidence of disability in Northern Ireland has traditionally been higher than Great Britain. Persons with limiting long term illness 20.36% in Northern Ireland.

Figures from the last Census (2011) show the proportion of the population with the following disabilities:

- 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 or 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)		
	It is recognised that as people age, they are more		
	likely to experience ill-health and disability. Data		
	from the Health Survey NI shows that Limiting		
	longstanding illness increases from 18% among		
	young adults aged 25 -34 years to 52% among		
Ethnicity	those who are 75 plus years. PCC Staff;		
Lumoity	Not assigned	64.29%	
	White	35.71%	
	Other	0.00%	
	Black African	0.00%	
	Indian	0.00%	
	Chinese	0.00%	
	Othor		
	Other; White 96.55%		
	Irish Traveller 0.14%		
	Roma 0.08%		
	Indian 0.52%		
	Chinese 0.50%		
	Filipino 0.23%		
	Pakistani 0.08%		
	Arab 0.10%		
	Other Asian 0.28%		
	Black African 0.42%		
	Black Other 0.16%		
	Mixed 0.76%		
	Other ethnicities 0.19%		
	(Census 2021)		
	Statistics from the HSC Interpreting Service Report		
	from April 2022 to June 2022 show the 10	most	
	requested regional languages:		
	1. Polish 4997		
	2. Arabic 4772		
	3. Romanian 2702 4. Lithuanian 2592		
	5. Bulgarian 1744		
	6. Portuguese 1674		
	7. Tetum 1376		

	8. Slovak 1118	
	9. Somali 961	
	10. Mandarin 850	
Sexual	PCC Staff;	
Orientation	Both Sexes	7.14%
	Do not wish to answer	64.29%
	Not assigned	25.00%
	Opposite sex	0.00%
	same sex	3.57%
	Other;	
	It is estimated the one in ten people in N Ireland are	
	from Lesbian Gay Bisexual Transgender 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
Gender	There is no data to suggest that the needs and experiences of learners in terms of the need for special considerations or reasonable adjustments may differ on the basis of gender.
Age	It is acknowledged that for older learners may require adjustment in terms of assessment that requires the access and use of Information Technology, there may be issues with digital access and literacy.
Religion	There is no data to suggest that the needs and experiences of learners in terms of the need for special considerations or reasonable adjustments may differ on the basis of religion.
Political Opinion	There is no data to suggest that the needs and experiences of learners in terms of the need for special considerations or reasonable adjustments may differ on the basis of gender.
Marital Status	There is no data to suggest that the needs and experiences of learners in terms of the need for special considerations or reasonable adjustments may differ on the basis of marital status.
Dependent Status	There are 213,980 carers in Northern Ireland, 11.8% of all residents, and it is estimated that there are around 30,000 young carers. Hazell et al (2019) encountered four main carer-

	specific barriers to the recruitment and retention of participants These were: (1) poor relationship with mental health clinicians, (2) conflicting with the care recipient's (CR) needs, (3) lack of spare time, and (4) lack of services for mental health carers. Carers may be identified as having higher probability that part of an assessment may been missed due circumstances related their caring responsibilities but beyond the control of the learner.
Disability	Learners may be identified as having particular adjustment requirements in relation to, for example, learning difficulties, a visual or hearing impairment or a mental illness. An adjustment may involve; • changing usual assessment arrangements • adapting assessment materials • providing assistance during assessment • re-organising the assessment physical environment • changing or adapting the assessment method • using assistive technology.
Ethnicity	Learners may be identified as having particular adjustment requirements in relation to having English as an additional language. An adjustment may involve; • changing usual assessment arrangements • adapting assessment materials • providing assistance during assessment • re-organising the assessment physical environment • changing or adapting the assessment method • using assistive technology. • commitment to provide Interpreters and translation services to support Ethnic Minority learners.
Sexual Orientation	There is no data to suggest that the needs and experiences of learners in terms of the need for special considerations or reasonable adjustments may differ on the basis of gender.

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.

Learners that categorise as disabled minority ethnic people may be identified as having particular adjustment requirements in relation to, for example, learning difficulties, a visual or hearing impairment, a mental illness, and English as an additional language.

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?

In developing the policy or decision what did you do or change to address the equality issues you identified?	What do you intend to do in future to address the equality issues you identified?
Where learners may be identified as having particular adjustment requirements, an adjustment may involve; • changing usual assessment arrangements • adapting assessment materials • providing assistance during assessment • re-organising the assessment physical environment • changing or adapting the assessment method • using assistive technology. Examples of reasonable adjustments; • Allowing extra time, e.g. assignment extensions • Using a different assessment location • Use of coloured overlays, low vision aids, CCTV • Use of assistive software • Assessment material in large format or Braille • Readers/scribes	A consistent and regular approach of course and assessment feedback will be sought from all learners in order to identify areas for improvement and identify outstanding adjustment requirements. The duty to make a reasonable adjustment is placed on the PCC as the service provider and a disabled learner has a right under the Disability Discrimination Act to request a reasonable adjustment to be made by the PCC. All requests will be considered, and decisions relating to the request will be dependent upon how it will facilitate access for the learner.

- Practical assistants/transcribers/prompter s
- Assessment material on coloured paper or in audio format
- Language-modified assessment material
- British Sign Language (BSL)
- Use of ICT/responses using electronic devices

Where there is identified digital access/literacy needs the PCC will employ its network of networks approach to signpost and refer learners to community support such as the 'Digital Age Project'.

The PCC holds a Service Level Agreement with the HSC Interpreter Service and can arrange for an interpreter in agreement with the prospective learner.

Development of the course content and potential assessment methods and criteria will be coproduced with service users. Additionally HSC colleagues from physically and learning disability will be asked to review development. As well as taking advice from community and voluntary sector colleagues to ensure that course content and assessment are as inclusive and accessible as possible.

It is acknowledged that potential Coproduction Associates whose participation will be required on the training course may have mobility or support needs. Support for care or mobility needs will be offered by the PCC as required by the service user or

carer and may cover preparation,
alternative transport options for travel
to and from a training venue, and
personal individual support both during
and after the activity. For example,
support may include provision of a
personal assistant or a support worker.

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	N/A	
Political Opinion	N/A	
Ethnicity	N/A	

(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)

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

Please tick:

Major impact	
Minor impact	х
No further impact	

Please tick:

Yes	
No	X

Please give reasons for your decisions.

Mitigation has been put in place to address any equality impacts identified in the screening of this policy. It is not thought that undertaking an EQIA will identify any further opportunities to promote equality of opportunity. PCC will monitor and review implementation of the Reasonable Adjustment & Special Consideration Policy.

(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?

How does the policy or decision currently encourage disabled people to participate in public life?

This policy gives guidance for the tutor/assessor and internal verify to consider a reasonable adjustment in the context of assessment that helps to reduce the effect of a disability or difficulty that places a learner at a substantial disadvantage in the assessment situation.

Development of the course content and potential assessment methods and criteria will be coproduced with service users. Additionally HSC colleagues from physical and learning disability will be asked to review development. As well as taking advice from community and voluntary sector colleagues to ensure that course content and assessment are as inclusive and accessible as possible.

As part of the project to develop a model for remunerating lived experience in co design/coproduction, the PCC a HSC body will adopt systems of that from BSO Shared Services to create a system for recruitment and payment that is fair and effective for all users. Disabled people will acquire additional protection from discrimination under the Employment Equality of Opportunity Policy. The system designed will ensure that people who receive benefits such as DLA are supported

What else could you do to encourage disabled people to participate in public life?

Inclusive promotion formats

In addition to co-design, the course could be co-delivered with an individual who has a disability.

with independent welfare rights advice in terms of paying them for their time as part of co-production, involvement and participation activities. Including participation on any PCC training provision. It is acknowledged that potential Coproduction Associates whose participation will be required on the training course may have mobility or support needs. Support for care or mobility needs will be offered by the PCC as required by the service user or carer and may cover preparation, alternative transport options for travel to and from a training venue, and personal individual support both during and after the activity. For example, support may include provision of a personal assistant or a support worker.

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?

How does the policy or decision currently promote positive attitudes towards disabled people?	What else could you do to promote positive attitudes towards disabled people?
Inclusive language	Co delivery of course and
Adjustment and special	assessments.
considerations arrangements	
Use of technology, differing formats	
and learning styles.	
Commitment to equality of	
opportunity.	
Provision of support for care of	
mobility if required.	

Commitment to flexibility and evaluation to meet the needs of learners with disability.	
Todiffer with diodollity.	

(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?

Interfered with? Yes/No	What is the interference and who does it impact upon?	Does this raise legal issues?* Yes/No
		Yes/No interference and who does it

^{*} 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
Participant Sec 75 Monitoring Leaner feedback	Equality monitoring data will be collected in relation to reasonable adjustments and special considerations – the data will indicate who in relation to the S75 groups has asked for these and who is granted.	N/A

Approved Lead Officer:

Position:

Coproduction and Collaboration
Project Coordinator

Date:

9/12/22

Policy/Decision Screened by:

Carol Collins

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

Any request for the document in another format or language will be considered. Please contact: Equality.Unit@hscni.net