

Equality and Human Rights Screening Template

The PHA 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

(1) INFORMATION ABOUT THE POLICY OR DECISION

1.1 Title of policy or decision

Supporting Performance Improvement Policy

1.2 Description of policy or decision

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

It is the aim of this Policy that the PHA is a place where all employees are enabled to work and perform to the best of their ability to deliver an excellent service. The purpose of this Policy is to provide a framework for the PHA to support employees with performance concerns to achieve effective standards of work

how will this be achieved? (key elements)

This policy will apply to all staff – consistent implementation will ensure that staff feel supported at work. It is important that all stages of the Supporting Performance Improvement Policy are undertaken in a way that is consistent with the HSC Values of Compassion, Openness and Honesty, Excellence and Working Together. The HSC Values provide the framework for a Just and Learning Culture which works to create an environment where employees are supported and empowered by their manager to learn and develop when needed. This approach is embedded throughout the Supporting Performance Improvement Policy to support and empower employees at each stage.

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

AFC Terms & Conditions

HSC Code of Conduct

PHA Policies for staff

Legislation relevant to staff in employment.

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

PHA Staff (including line managers)

External

Trade unions

Other HSC organisations

Statutory enforcement bodies

This list is illustrative only

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

what are they?

All PHA Policies which apply to staff

Employment law

who owns them?

PHA

HSC NI

Department of Health

NI Assembly

(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.*

2.2.1 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.*

PHA Workforce Data (2023)
Census Data 2021
NI Statistics & Research Agency
What we do Labour Relations Agency - Official

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>Staff Profile – PHA (June 2023)</p> <table> <tr> <td>Male</td><td>23.75%</td></tr> <tr> <td>Female</td><td>76.25%</td></tr> </table> <p>Population profile: Census 2021: The proportion of females in 2021 is 51.00% (967,043). The male population is 49.00% (936,132) in 2021. https://www.nisra.gov.uk/system/files/statistics/census-2021-ms-a07.xlsx 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):</p>	Male	23.75%	Female	76.25%
Male	23.75%				
Female	76.25%				

	<p>gender variant to some degree 1%</p> <p>have sought some medical care 0.025%</p> <p>having already undergone transition 0.015%</p> <p>The number who have sought treatment seems likely to continue growing at 20% per annum or even faster. Few younger people present for treatment despite the fact that most gender variant adults report experiencing the condition from a very early age. Yet, presentation for treatment among young people is growing even more rapidly (50% p.a.). Organisations should assume that there may be nearly equal numbers of people transitioning from male to female (trans women) and from female to male (trans men).</p> <p>Applying GIRES figures to NI population (using NISRA mid-year population estimates for 2021) N=1,903,175:</p> <p>19,031 people who do not identify with gender assigned to them at birth</p> <p>475 likely to have sought medical care</p> <p>285 likely to have undergone transition.</p>																				
Age	<p>Staff Profile – PHA (June 2023)</p> <table border="1"> <tr> <td>16-24</td><td>6.21%</td></tr> <tr> <td>25-29</td><td>7.52%</td></tr> <tr> <td>30-34</td><td>5.51%</td></tr> <tr> <td>35-39</td><td>9.12%</td></tr> <tr> <td>40-44</td><td>8.52%</td></tr> <tr> <td>45-49</td><td>10.32%</td></tr> <tr> <td>50-54</td><td>12.83%</td></tr> <tr> <td>55-59</td><td>14.73%</td></tr> <tr> <td>60-64</td><td>11.42%</td></tr> <tr> <td>>=65</td><td>13.83%</td></tr> </table>	16-24	6.21%	25-29	7.52%	30-34	5.51%	35-39	9.12%	40-44	8.52%	45-49	10.32%	50-54	12.83%	55-59	14.73%	60-64	11.42%	>=65	13.83%
16-24	6.21%																				
25-29	7.52%																				
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>=65	13.83%																				

	<p>Population profile: published by NISRA in 2022 (Census 2021 main statistics demography tables – age and sex Northern Ireland Statistics and Research Agency (nisra.gov.uk)) show that:</p> <p>15-24 yrs (inclusive) = 224,589 (11.80% of all NI population) 25-29 yrs = 116,409 (6.12%) 30-34 yrs = 126 050 (6.62%) 35-39 yrs = 127,313 (6.69%) 40-44 yrs = 122,163 (6.42%) 45-49 yrs = 121,670 (6.39%) 50-54 yrs = 130,967 (6.88%) 55-59 yrs = 129,276 (6.79%) 60-64 yrs = 113,049 (5.94%) 65-74 yrs = 176,931 (9.30%)</p> <p>Age projections</p> <p>NISRA Estimated and projected population by age, mid-2016 to mid-2041 show that in 2016, 20.8% of the NI Population were aged 0-15 years, and this is projected to decrease 19.8% in mid 2045. The proportion of adults aged 16-64 is also set to decrease to 3.4% by mid 2045. However, the proportion of people aged 65 years and over is projected to increase in the next 25 years, overtaking the numbers of children.</p> <p>2020-based interim population projections - statistical bulletin (nisra.gov.uk)</p>												
Religion	<p>Staff Profile – PHA (June 2023)</p> <table><tr><td>Perceived Protestant</td><td>1.35%</td></tr><tr><td>Protestant</td><td>15%</td></tr><tr><td>Perceived Roman Catholic</td><td>0.74%</td></tr><tr><td>Roman Catholic</td><td>18.02%</td></tr><tr><td>Neither</td><td>0.83%</td></tr><tr><td>Perceived Neither</td><td></td></tr></table>	Perceived Protestant	1.35%	Protestant	15%	Perceived Roman Catholic	0.74%	Roman Catholic	18.02%	Neither	0.83%	Perceived Neither	
Perceived Protestant	1.35%												
Protestant	15%												
Perceived Roman Catholic	0.74%												
Roman Catholic	18.02%												
Neither	0.83%												
Perceived Neither													

	Not assigned	64.06%	
	<p>Population profile:</p> <p>Religion or Religion brought up in</p> <p>45.70% (869,751) of the population were either Catholic or brought up as Catholic.</p> <p>43.48% (827,544) stated that they were Protestant or brought up as Protestant.</p> <p>1.50% (28,513) of the population belonged to or had been brought up in other religions and Philosophies.</p> <p>9.32% (177,360) neither belonged to, nor had been brought up in a religion.</p> <p>(Census 2021)</p>		
Political Opinion	Staff Profile – PHA (June 2023)		
	Broadly Nationalist	0.70%	
	Other	2.30%	
	Broadly Unionist	0.90%	
	Not assigned	94.49%	
	Do not wish to answer	1.60%	
	Population profile: Nationality		
	<ul style="list-style-type: none"> British only – 31.86% (606,263) Irish only – 29.13% (554,415) Northern Irish only – 19.78% (376,444) British and Northern Irish only – 7.95% (151,327) Irish and Northern Irish only – 1.76% (133,581) British, Irish and Northern Irish – 1.47% (28,050) British and Irish only – 0.62% (11, 768) Other – 7.43% (141,327) <p>(Census 2021)</p>		

Marital Status	Staff Profile – PHA (June 2023)	
	Divorced	0.40%
	Mar/CP	16.93%
	Other	0.20%
	Seprart	0.20%
	Single	4.41%
	Unknwn	77.76%
	Widw/R	0.10%
	Not assigned	
	<p>Population profile:</p> <p>45.49% (690,509) of those aged 16 or over were married</p> <p>38.07% (576,708) were single</p> <p>0.18% (2,742) were registered in a civil partnerships</p> <p>6.02% (91,128) were either divorced, separated or formerly in a civil partnership</p> <p>6.36% (96,384) were either widowed or a surviving partner (Census 2021)</p> <p>Northern Ireland Life and Times (2022)</p> <p>Single (never married) 34%</p> <p>Married and living with husband/wife 51%</p> <p>A civil partner in a legally-registered civil partnership 0%</p> <p>Married and separated from husband/wife 3%</p> <p>Divorced 5%</p> <p>Widowed 6%</p> <p>Civil partnerships</p> <p>Annual Reports of the Registrar General for NI show that Between 2005 and 2018 inclusive, there have been 1298 civil partnerships registered in NI. (Available at https://www.nisra.gov.uk/statistics/births-deaths-and-marriages/registrar-general-annual-report)</p>	

Dependent Status	Staff Profile – PHA (June 2023)	
	Yes	4.01%
	Not assigned	93.79%
	No	2.20%
	<p>Population profile:</p> <ul style="list-style-type: none"> • CarersNI State of Caring 2022 Annual survey (UK wide, including NI) • 82% identified as female and 17% identified as male • 4% are aged 25-34, 17% are aged 35-44, 33% are aged 45-54, 31% are aged 55-64 and 14% are aged 65+ • 24% have a disability • 98% described their ethnicity as white • 28% have childcare responsibilities for a non-disabled child under the age of 18 alongside their caring role • 56% are in some form of employment and 18% are retired from work. • 31% have been caring for 15 year or more, 16% for between 10-14 years, 25% for 5-9 years, 25% for 1-4 years, and 3% for less than a year • 46% provide 90 hours or more of care per week, 13% care for 50-89 hours, 23% care for 20-49 hours, and 19% care for 1-19 hours per week • 67% care for one person, 25% care for two people, 5% care for three people and 3% care for four or more people. • 1 in 3 carers said they could afford their bills without struggling financially. • 28% said they had access to paid carers leave from work • 54% said they had been offered flexible working arrangements • 1 in 5 carers reported their physical health to be bad or very bad • 24% had been caring for 10 years or more • 25% were caring for 50+ hours a week 	

	<ul style="list-style-type: none"> • 27% reported their mental health as bad or very bad • 23% of carers say the care and support services available in their area do not meet their needs • 43% with unpaid caring responsibilities in NI are also in full/part-time employment • 130k had either given up work or reduced their hours to care for someone • 78% were worried about being able to juggle the two. • Over 60% said that working from home had enable them to balance work and caring more effectively • 64% had given up opportunities at work due to caring • 41% said not working from home would make them consider leaving their job <p>Health Survey NI 2021/22</p> <ul style="list-style-type: none"> • Respondents with caring responsibilities – 17% • Respondents with caring responsibilities by gender – Male – 13%; Female – 22% 								
Disability	<table border="1"> <tr> <th colspan="2">Staff Profile – PHA (June 2023)</th></tr> <tr> <td>No</td><td>15.13%</td></tr> <tr> <td>Not assigned</td><td>83.87%</td></tr> <tr> <td>Yes</td><td>1.00%</td></tr> </table> <p>Population profile:</p> <ul style="list-style-type: none"> • 34.67% (659,805) regard themselves as having a 1 or more long – term health problems, which has an impact on their day to day activities. • 65.33% (1,243,371) of residents did not have long – term health condition. • Deafness or partial hearing loss – 5.75% (109,457) • Blindness or partial sight loss – 1.78% (33,961) • Communication Difficulty – 1.65% (29,879) • Autism or Asperger Syndrome – 1.86% (35,367) • Mobility or Dexterity Difficulty – 1.48% (28,138) 	Staff Profile – PHA (June 2023)		No	15.13%	Not assigned	83.87%	Yes	1.00%
Staff Profile – PHA (June 2023)									
No	15.13%								
Not assigned	83.87%								
Yes	1.00%								

	<ul style="list-style-type: none"> • A learning intellectual difficulty – 0.89% (16,923) • An emotional, psychological or mental health condition – 8.68% (165,127) • Long – term pain or discomfort – 11.58% (220,328) • Shortness of breath or difficulty breathing – 10.29% (195,754) • Frequent confusion or memory loss – 1.99% (37,789) <p>(Census 2021)</p> <p>Health Survey NI (2021/22)</p> <ul style="list-style-type: none"> • 40% longstanding illness (30% limiting and 11% non-limiting illness) • Females (44%) were more likely than males (36%) to have a long-term condition. • A fifth (24%) reported high levels of anxiety, while 41% reported very low levels 														
Ethnicity	<table border="1"> <tr> <th colspan="2">Staff Profile – PHA (June 2023)</th></tr> <tr> <td>Not assigned</td><td>91.98%</td></tr> <tr> <td>White</td><td>8.02%</td></tr> <tr> <td>Other</td><td></td></tr> <tr> <td>Black African</td><td></td></tr> <tr> <td>Indian</td><td></td></tr> <tr> <td>Chinese</td><td></td></tr> </table> <p>Population profile: 3.45% (65,604) of the usual resident population belonged to minority ethnic groups: White – 96.55% (1,837,575) Chinese – 0.50% (9,495) Irish Traveller – 0.14% (2,609) Indian – 0.52% (9,881) Pakistani – 0.08% (1,596) Filipino – 0.23% (4,451) Other Asian – 0.28% (5,244)</p>	Staff Profile – PHA (June 2023)		Not assigned	91.98%	White	8.02%	Other		Black African		Indian		Chinese	
Staff Profile – PHA (June 2023)															
Not assigned	91.98%														
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Other															
Black African															
Indian															
Chinese															

	<p>Black African – 0.42% (8,069)</p> <p>Black Other – 0.16% (2,963)</p> <p>Arab – 0.10% (1,817)</p> <p>Roma – 0.08% (1,529)</p> <p>Mixed – 0.76% (14,382)</p> <p>Other – 0.19% (3,568)</p> <p>(Census, 2021)</p>	
Sexual Orientation	Staff Profile – PHA (June 2023)	
	Do not wish to answer	0.50%
	Not assigned	94.19%
	Opposite sex	4.71%
	Both Sexes	
	same sex	0.60%
	Population profile:	
	<ul style="list-style-type: none"> • In 2021, the NI Census showed that out of residents aged 16 and over, 2.09% (31,616) indicated that they were LGB/other sexual orientation. This is out of a population profile of 1,514,743. • 90.04% of the NI population identified as heterosexual or straight and 2.09% of the population identified themselves as lesbian, gay or bisexual (LGB). This comprised of: <ul style="list-style-type: none"> ○ 1.17% identifying as gay or lesbian ○ 0.75% identifying as bisexual • A further 0.17% of the population identified themselves as “Other”, which means that they did not consider themselves to fit into the heterosexual or straight, bisexual, gay or lesbian categories. A further 4.58% refused, or did not know how to identify themselves. • The population aged 16 to 24 were the largest age group to identify as LGB in 2021 (4.61%). 	
	All usual residents aged 16 and over	1,514,742
	Straight or Heterosexual	1,363,858
	Gay or Lesbian	17,713
	Bisexual	11,305

	Pansexual	617	
	Asexual	400	
	Straight or heterosexual and bisexual	353	
	Straight or heterosexual and gay or lesbian	176	
	Queer	148	
	Gay or lesbian and bisexual	137	
	Female	86	
	Male	63	
	Trisexual	51	
	Bisexual and pansexual	43	
	Straight or heterosexual, gay or lesbian & bisexual	40	
	Straight or heterosexual, gay or lesbian, bisexual & other	35	
	Gay or lesbian and queer	31	
	Bisexual and queer	30	
	Fluid	14	
	Straight or heterosexual and asexual	14	
	No label	12	
	Confused	11	
	Bisexual and asexual	11	
	Questioning	10	
	Other sexual orientation	316	
	Prefer not to say	69,307	
	Not stated	49,961	

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).

<i>Category</i>	<i>Needs and Experiences</i>
Gender	Evidence shows that females are most likely to take longer breaks from the work place due to caring responsibilities which may create knowledge gaps in their performance.
Age	Younger members of staff may lack experience in in the work place whilst older workers may find change and technological change difficult.
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	Evidence shows that females are most likely to take longer breaks from the work place due to caring responsibilities which may create knowledge gaps in their performance. This includes employees from single parent status.
Dependent Status	Evidence shows that females are most likely to take longer breaks from the work place due to caring responsibilities which may create knowledge gaps in their performance, and includes single parent status. Employees with dependents may feel fatigued due to lack of sleep
Disability	Individuals with sensory problems will have specific requirements with regards to communication relating to the policy and its implementation, to include use of policy, steps to being subjected to the policy and associated correspondence/documents. Also, those with learning difficulties may require additional support in order to get an understanding of how the policy works and the processes involved. For example, staff with Mental Health disorders or Learning Disabilities may require adjustments to the procedure – e.g. deadline extension, additional time and support to review documentation. Those with physical disabilities may need reasonable adjustments to access fully all elements of the procedure.

	These should be facilitated via reasonable adjustments under Disability Discrimination Act 1995. Staff who are disabled, may reasonably need to be accompanied by someone who can support them because of their disability, e.g. someone from a disability organisation
Ethnicity	Individuals from different ethnic minority backgrounds where English is not their first language may encounter difficulties in the understanding of the policy.
Sexual Orientation	There is no data to suggest that there are specific needs or experiences arising within this category

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>Gender; Age; Marital Status & Dependent status: Ensure that this policy is shared and promoted throughout the organisation to ensure every section 75 group are aware of the policy and the measures taken to support staff to perform in their roles. This can be achieved via the numerous learning programmes, internal and external to the organisation, that staff can avail of to improve learning and ultimately performance.</p> <p>Disability: In line with PHA's Accessible Formats Policy, PHA will provide</p>	<p>The PHA is committed to providing equality of opportunity, and strives to promote a good and harmonious working environment where every employee is treated with respect and dignity and in which no one is disadvantaged based on their age, disability, marital or civil partnership status, political opinion, race, religious belief, sex (including gender reassignment), sexual orientation, with dependants or without dependants.</p> <p>PHA will consider mitigating circumstances and arrangements will be put into place to assist accommodating an employee where their performance may be below the required standard.</p>

<p>alternative formats on request to meet the needs of people with a disability who may need information in an accessible format.</p> <p>The policy states: At each stage of the procedure where appropriate we will consider whether the unsatisfactory performance is related to a disability and, if so, whether there are any reasonable adjustments that could be made to assist the employee.</p> <p>Should disability be considered as potentially being a contributory factor to the performance concern, the application of this Policy will be paused for consideration and consultation with HR for next appropriate stages.</p> <p>PHA will also consider discrete measures to promote equality for the identified equality groups in addition to the general equal opportunities statement given in this section of the screening document.</p> <p>Ethnicity – PHA recognise that employees whose language is not their first language may have difficulty in a full understanding of the policy and may consider interpreting services if required.</p>	
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2.4 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	The PHA is committed to providing equality of opportunity, and strives to promote a good and harmonious working environment where every employee is treated with respect and dignity and consistent with the HSC Values of Compassion, Openness and Honesty, Excellence and Working Together.	Ensure that this policy is shared and promoted throughout the organisation to ensure every section 75 group are aware of the policy and the measures taken to support staff to perform in their roles.
Political Opinion	As above	As above
Ethnicity	As above	As above

(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.

Issues for any of the Section 75 groups highlighted in this screening have been mitigated against. Implementation of this policy will give support and offer fairness and consistency of approach for all fixed term employees in line with legislative requirements.

It is not believed that subjecting the policy to a full EQIA will highlight any further equality issues.

(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>
Supports employees via reasonable adjustments to work to the required level.	Use all internal networks to promote organisational support for improving staff experience and culture.

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>
Disability is a key equality category covered by this policy. Reasonable adjustments will be considered for staff with disability to their needs are met in the outworking's and practical application of the policy in line with related PHA policy.	Use all internal networks to promote organisational support for improving staff experience and culture.

(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
Ongoing Monitoring and reporting of any trends	Regular reporting on trends	Regular reporting on trends

Approved Lead Officer:	Karyn Patterson
Position:	Senior HR Business Partner & Change Manager
Contact Details	Karyn.patterson@hscni.net
Date:	31/12/2024
Policy/Decision Screened by:	Karyn Patterson

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 the Equality Unit: Email: Equality.Unit@hscni.net Phone: 028 9536 3961