

Equality and Human Rights Screening Template

The BSO 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?

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.

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

BSO Annual Quality Report 2023-24

1.2 Description of policy or decision

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

The BSO Annual Quality Report 2023-24 outlines some of the key quality achievements and developments from all of the service areas and programmes within the BSO.

How will this be achieved? (key elements)

It reports centred around the five strategic goals of the Q2020 Strategy:

Theme 1: Transforming the Culture

- Objective 1: We will make achieving high quality the top priority at all levels in health and social care.
- Objective 2: We will promote and encourage partnerships between staff, patients, clients and carers to support decision making.

Theme 2: Strengthening the workforce

- Objective 3: We will provide the right education, training and support to deliver high quality service.
- Objective 4: We will develop leadership skills at all levels and empower staff to take decisions and make changes.

Theme 3: Measuring the improvement

- Objective 5: We will improve outcome measurement and report on progress for safety effectiveness and the patient/client experience.
- Objective 6: We will promote the use of accredited improvement

techniques and ensure that there is sufficient capacity and capability within the HSC to use them effectively.

Theme 4: Raising the standards

- Objective 7: We will establish a framework of clear evidence-based standards and best practice guidance.
- Objective 8: We will establish dynamic partnerships between service users, commissioners and providers to develop, monitor and review standards.

Theme 5: Integrating the care

- Objective 9: We will develop integrated pathways of care for individuals.
- Objective 10: We will make better use of multidisciplinary team working and shared opportunities for learning and development in the HSC and with external partners.

1.3 Main stakeholders affected (internal and external)

Main stakeholders are BSO staff, current and potential organisational customers of BSO, consumers of BSO services, DoH (in particular Sponsor Branch).

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

What are they?

Draft NI Programme for Government 2016-21

“Transforming Your Care”, a review of Health and Social Care in NI (DoH, 2011)

‘Quality 2020’, a 10-year strategy to Protect and Improve Quality in Health and Social Care in NI (DoH, 2011)

‘Making Life Better’: a whole system strategic framework for public health 2013-2023 (DoH, 2016)

Health and Wellbeing 2026: ‘Delivering Together’ (DoH, 2016)

BSO Service Offerings and Service Level Agreements

Who owns them?

NI Assembly

DoH

BSO

SPPG
Public Health Agency
HSC Trusts
Other HSC customer organisations

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

2.1 Data gathering

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

- Census 2021
- Equality Commissions NI, 2006
- [Policy and research | Carers NI \(carersuk.org\)](http://carersuk.org)
- GIRES. The Number of Gender Variant People in the UK - Update 2011. Available at; <http://www.gires.org.uk/prevalence.php>
- Health Survey NI 2012-13
http://www.dhsspsni.gov.uk/index/stats_research/stats-public-health.htm
- Electoral Office NI, 2011 Northern Ireland Statistics and Research Agency (NISRA) 2007
- Workforce Data (HRPTS)
- BSO Customer Satisfaction Surveys 2017-19. Northern Ireland Health and Social Care Workforce Census March 2021.

[Sexual identity, UK - Office for National Statistics \(ons.gov.uk\)](http://ons.gov.uk)

2.2 Quantitative Data

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

Category	<i>What is the makeup of the affected group? (%) Are there any issues or problems? For example, a lower uptake that needs to be addressed or greater involvement of a particular group?</i>
-----------------	---

Gender	<p>The proportion of females in 2021 was 50.8% (967,043) and of males was 49.2% (936,132) (total population of 1,903,175)</p> <p>GIRES 2014 estimate the number of gender nonconforming employees and service users, based on the information that GIRES assembled for the Home Office and subsequently updated:</p> <ul style="list-style-type: none"> • gender nonconforming to some degree (1%) • likely to seek medical treatment for their condition at some stage (0.2%) • receiving such treatment already (0.03%) • having already undergone transition (0.02%) • having a GRC (0.005%) • likely to begin treatment during the year (0.004%). <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 youngsters 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 n=1,810,900 (Census 2011):</p> <ul style="list-style-type: none"> • 18109 people who do not identify with gender assigned to them at birth • 3622 likely to seek treatment • 362 have undergone transition • 91 have a Gender Recognition Certificate <p>BSO STAFF</p> <p>Male 48.12% Female 51.88%</p>
Age	<p>Age profile of the NI population (Census 2021):</p>

	<p>Age band Population Percentage</p> <p>0-14 365,200 19.2%</p> <p>(15-64 1,211,500 63.7%)</p> <p>15-39 594,400 31.2%</p> <p>40-64 617,100 32.4%</p> <p>(65+ 326,500 17.2%)</p> <p>65-84 287,100 15.1%</p> <p>85+ 39,400 2.1%</p> <p>All ages 1,903,200 100%</p>
Religion	<p>Current Religion</p> <ul style="list-style-type: none"> • 'no religion' (17.4%) • 'religion not stated' (1.6%) • Catholic (42.3%) • Presbyterian Church in Ireland (16.6%) • Church of Ireland (11.5%) • Methodist (2.4%) • Other Christian denominations (6.9%) • Other non-Christian Religions (1.3%). <p>Religion/religion of upbringing (Number - Percentage)</p> <p>Catholic 869,800 45.7%</p> <p>Current religion 805,200 42.3%</p>

	<p>Religion of upbringing 64,600 3.4%</p> <p>Protestant and other Christian (including Christian related) 827,500 43.5%</p> <p>Current religion 711,000 37.4%</p> <p>Religion of upbringing 116,600 6.1%</p> <p>Other religions 28,500 1.5%</p> <p>Current religion 25,500 1.3%</p> <p>Religion of upbringing 3,000 0.2%</p> <p>None 177,400 9.3%</p> <p>All usual residents 1,903,200 100.0%</p>
Political Opinion	<p>National identity (nationality based) (Number – Percentage)</p> <ul style="list-style-type: none"> • British 814,600 42.8% • Irish 634,000 33.3% • Northern Irish 598,800 31.5% • English 16,800 0.9% • Scottish 10,200 0.5% • Welsh 2,000 0.1% • Other national identities 113,400 6.0% <p>National identity (person based) (Number – Percentage)</p> <ul style="list-style-type: none"> • British only 606,300 31.9% • Irish only 554,400 29.1% • Northern Irish only 376,400 19.8% • British & Northern Irish only 151,300 8.0%

- Irish & Northern Irish only 33,600 1.8%
- British, Irish & Northern Irish only 28,100 1.5%
- British & Irish only 11,800 0.6%
- English only/Scottish only/Welsh only 16,200 0.9%
- Other combination of British/Irish/Northern Irish/English/Scottish/Welsh only 11,700 0.6%
- Other national identities 113,400 6.0%
- Polish only 23,900 1.3%
- Lithuanian only 11,900 0.6%
- Romanian only 7,100 0.4%
- Portuguese only 6,900 0.4%
- Bulgarian only 4,300 0.2%
- Indian only 4,100 0.2%
- Other national identity with one or more of British/Irish/Northern Irish/English/Scottish/Welsh only 12,700 0.7%
- Other national identities 42,600 2.2%

All usual residents 1,903,200 100.0%

BSO STAFF

Broadly Nationalist 3.71%
 Other 4.20%
 Broadly Unionist 3.76%
 Not assigned 82.15%
 Do not wish to answer 6.18%

Marital Status

- 45.59% (690, 509) of those aged 16 or over were married

- 38.07% (576, 708) were single
- 0.18% (2,742) were registered in civil partnerships (more than double since 2011)
- 6.02% (91,128) were either divorced or formerly in a civil partnership which is now legally dissolved
- 6.36% (96, 384) were either widowed or a surviving partner from a civil partnership

3.78% (57, 272) were separated (but still legally married or still legally in a civil partnership)

BSO STAFF

Divorced 1.63%
 Mar/CP 33.53%
 Other 0.89%
 Separated 0.25%
 Single 11.37%
 Unknown 51.53%
 Widow/R 0.59%
 Not assigned 0.20%

Dependent Status

Table 17: Provision of unpaid care
 ('Provision of unpaid care' covers looking after, giving help or support to anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age. It excludes any activities carried out in paid employment.)

Northern Ireland All usual residents aged 5 and over 1,789,348
 Percentage of usual residents aged 5 and over who provide:

- No unpaid care 87.58%
- 1-19 hours unpaid care per week 5.63%
- 20-34 hours unpaid care per week 1.38%
- 35-49 hours unpaid care per week 1.57%

50+ hours unpaid care per week 3.84%

Carers NI (State of Caring 2022 report)

There are over 290,000 people providing some form of unpaid care for a sick or disabled family member or friend in Northern Ireland – around 1 in 5 adults. (Carers UK (2022). Carers Week research report 2022.)

Of those participating in the survey...

- 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.

BSO STAFF

Yes 11.72%
Not assigned 81.31%
No 6.97%

Disability

Out of all usual residents (n=1,903,179), the Percentage of usual

residents whose day-to-day activities are:

Limited a lot – 11.45%

Limited a little – 12.88%

Not limited – 75.67%

('Day-to-day activities limited' covers any health problem or disability (including problems related to old age) which has lasted or is expected to last for at least 12 months.)

The breakdown of the various long-term conditions as outlined in the 2021 Census is:

Type of long-term condition	Percentage of population with condition %
Deafness or partial hearing loss	5.75
Blindness or partial sight loss	1.78
Mobility of Dexterity Difficulty that requires wheelchair use	1.48
Mobility of Dexterity Difficulty that limits basic physical activities	10.91
Intellectual or learning disability	0.89
Learning difficulty	3.5
Autism or Asperger syndrome	1.86
An emotional, psychological or mental health condition	8.68
Frequent periods of confusion or memory loss	1.99
Long – term pain or discomfort.	11.58
Shortness of breath or difficulty	10.29

	breathing																																														
	Other condition	8.81																																													
Ethnicity	<p>BSO STAFF No 33.78% Not assigned 64.39% Yes 1.83%</p> <p>In the general population the 2021 Census indicated that 3.4% (65,600) of the usual resident population belonged to minority ethnic groups.</p> <p>Ethnic Group</p> <table border="0"> <thead> <tr> <th data-bbox="320 913 544 954">Ethnic Group</th> <th data-bbox="544 913 655 954">Number</th> <th data-bbox="655 913 884 954">Percentage</th> </tr> </thead> <tbody> <tr> <td data-bbox="320 987 400 1028">White</td> <td data-bbox="400 987 703 1028">1,837,600</td> <td data-bbox="703 987 884 1028">96.6%</td> </tr> <tr> <td data-bbox="320 1061 671 1102">Minority Ethnic Group</td> <td data-bbox="671 1061 751 1102">65,600</td> <td data-bbox="751 1061 884 1102">3.4%</td> </tr> <tr> <td data-bbox="320 1135 400 1176">Black</td> <td data-bbox="400 1135 544 1176">11,000</td> <td data-bbox="544 1135 655 1176">0.6%</td> </tr> <tr> <td data-bbox="320 1209 400 1249">Indian</td> <td data-bbox="400 1209 496 1249">9,900</td> <td data-bbox="496 1209 655 1249">0.5%</td> </tr> <tr> <td data-bbox="320 1283 400 1323">Chinese</td> <td data-bbox="400 1283 496 1323">9,500</td> <td data-bbox="496 1283 655 1323">0.5%</td> </tr> <tr> <td data-bbox="320 1357 400 1397">Filipino</td> <td data-bbox="400 1357 496 1397">4,500</td> <td data-bbox="496 1357 655 1397">0.2%</td> </tr> <tr> <td data-bbox="320 1431 400 1471">Irish Traveller</td> <td data-bbox="400 1431 496 1471">2,600</td> <td data-bbox="496 1431 655 1471">0.1%</td> </tr> <tr> <td data-bbox="320 1505 400 1545">Arab</td> <td data-bbox="400 1505 496 1545">1,800</td> <td data-bbox="496 1505 655 1545">0.1%</td> </tr> <tr> <td data-bbox="320 1579 400 1619">Pakistani</td> <td data-bbox="400 1579 496 1619">1,600</td> <td data-bbox="496 1579 655 1619">0.1%</td> </tr> <tr> <td data-bbox="320 1653 400 1693">Roma</td> <td data-bbox="400 1653 496 1693">1,500</td> <td data-bbox="496 1653 655 1693">0.1%</td> </tr> <tr> <td data-bbox="320 1727 400 1767">Mixed Ethnicities</td> <td data-bbox="400 1727 544 1767">14,400</td> <td data-bbox="544 1727 655 1767">0.8%</td> </tr> <tr> <td data-bbox="320 1800 400 1841">Other Asian</td> <td data-bbox="400 1800 496 1841">5,200</td> <td data-bbox="496 1800 655 1841">0.3%</td> </tr> <tr> <td data-bbox="320 1874 400 1915">Other Ethnicities</td> <td data-bbox="400 1874 496 1915">3,600</td> <td data-bbox="496 1874 655 1915">0.2%</td> </tr> <tr> <td data-bbox="320 1948 400 1989">All usual residents</td> <td data-bbox="400 1948 703 1989">1,903,200</td> <td data-bbox="703 1948 884 1989">100.0%</td> </tr> </tbody> </table>		Ethnic Group	Number	Percentage	White	1,837,600	96.6%	Minority Ethnic Group	65,600	3.4%	Black	11,000	0.6%	Indian	9,900	0.5%	Chinese	9,500	0.5%	Filipino	4,500	0.2%	Irish Traveller	2,600	0.1%	Arab	1,800	0.1%	Pakistani	1,600	0.1%	Roma	1,500	0.1%	Mixed Ethnicities	14,400	0.8%	Other Asian	5,200	0.3%	Other Ethnicities	3,600	0.2%	All usual residents	1,903,200	100.0%
Ethnic Group	Number	Percentage																																													
White	1,837,600	96.6%																																													
Minority Ethnic Group	65,600	3.4%																																													
Black	11,000	0.6%																																													
Indian	9,900	0.5%																																													
Chinese	9,500	0.5%																																													
Filipino	4,500	0.2%																																													
Irish Traveller	2,600	0.1%																																													
Arab	1,800	0.1%																																													
Pakistani	1,600	0.1%																																													
Roma	1,500	0.1%																																													
Mixed Ethnicities	14,400	0.8%																																													
Other Asian	5,200	0.3%																																													
Other Ethnicities	3,600	0.2%																																													
All usual residents	1,903,200	100.0%																																													

Country of birth

Country of birth Number Percentage

Northern Ireland 1,646,300 86.5%

Great Britain 92,300 4.8%

England 72,900 3.8%

Scotland 16,500 0.9%

Wales 2,800 0.2%

Republic of Ireland 40,400 2.1%

Outside United Kingdom and Ireland 124,300 6.5%

Europe (other EU countries) 67,500 3.5%

Europe (other non-EU countries) 3,700 0.2%

Other Countries in the World 53,100 2.8%

All usual residents 1,903,200 100.0%

Main language of usual residents aged 3 and over

Main language Number Percentage

English 1,751,500 95.4%

Main language not English 85,100 4.6%

Polish 20,100 1.1%

Lithuanian 9,000 0.5%

Irish 6,000 0.3%

Romanian 5,600 0.3%

Portuguese 5,000 0.3%

Arabic 3,600 0.2%

Bulgarian 3,600 0.2%

Other languages 32,200 1.8%

	<p>All usual residents aged 3 and over 1,836,600 100.0%</p> <p>BSO STAFF</p> <p>Not assigned 76.41% White 23.19% Other 0.25% Black African 0.00% Indian 0.10% Chinese 0.05%</p>
Sexual Orientation	<ul style="list-style-type: none"> • Straight or heterosexual: 90.04% (1,363,859) • Gay or lesbian: 1.17% (17,713) • Bisexual: 0.75% (11,306) • Other sexual orientation: 0.17 (2,597) • Prefer not to say: 4.58% (69,307) <p>Not stated: 3.3% (49,961)</p> <p>BSO STAFF</p> <p>Do not wish to answer 1.43% Not assigned 82.00% Opposite sex 15.38% Both Sexes 0.25% same sex 0.94%</p>

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	<p>The Annual Quality Report 23-24 is a reflection on the quality of work carried out by BSO throughout 2023-24. This quality report was based around five key Quality 2020 objectives as set out by the DoH.</p> <p>BSO recognises that the needs, experiences and priorities of individuals and groups within each Section 75 category will vary and that some may require specific needs to experience the positive impact on health inequalities intended in this Annual Quality Report. This will mostly affect the categories of</p>
Age	
Religion	
Political Opinion	
Marital Status	
Dependent Status	
Disability	
Ethnicity	<p>Ethnicity: those whose first language is not English may require the documentation in a different language.</p>
Sexual Orientation	<p>For those categories where there are seemingly no differing impacts then you can use the wording “There is no evidence to suggest that the needs and experiences differ on the basis of Gender; Age; Religion; Political Opinion; Marital Status; Dependent Status; Sexual Orientation.”</p>

2.4 Making Changes

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

<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>ReachDeck feature now included in all new BSO web pages which has a built-in translator, and can enlarge text, read aloud sections and supports those with additional requirements.</p>	

2.5 Good Relations

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

<i>Group</i>	<i>Impact</i>	<i>Suggestions</i>
Religion	N/A	
Political Opinion		
Ethnicity		

(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.

The Annual Quality Report 2023-24 main quality issues have been outlined and addressed. It is not thought that subjecting the plan to an EQIA will identify further opportunities to promote equality of opportunity.

(4) CONSIDERATION OF DISABILITY DUTIES

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

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

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

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

(5) CONSIDERATION OF HUMAN RIGHTS

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

Approved Lead Officer: Karen Hunter

Position: Director of Strategic Planning and Customer Engagement

Date: 25th September 2024

Policy/Decision Screened by: _____

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