

## Chapter 6: Mitigation Report



# **Equality and Human Rights Mitigation Report**

**April 2020 – March 2021**

## CEC Education Delivery Plan

<i><b>In developing the policy or decision what did you do or change to address the equality issues you identified?</b></i>	<i><b>What do you intend to do in future to address the equality issues you identified?</b></i>
<p><b>Gender:</b> Females are more likely to have caring responsibilities than males, and are more likely to work part time. This may have an impact of the timing and duration of programmes, as well where they are delivered</p> <p><b>Dependents:</b> Staff who are carers of an individual with a longstanding health issue or who are parents may find it more difficult to attend training outside their local area, due to their caring responsibilities. They may also be restricted as to times when they can attend training.</p> <p><b>Religion/ political opinion:</b></p> <p><b>Disability:</b></p>	<p>All CEC are required to undertake 'Equality &amp; Human Rights Awareness: Making a Difference' e-learning and to adhere to the HSC Values.</p> <p>CEC will continue to offer half day / short duration programmes. This will address the needs of carers, and those who work part time. A small number of courses last more than 30 hours but these do not run on consecutive days.</p> <p>Courses are delivered from four hospital based sites and are delivered in mornings or afternoons. CEC will consider offering programmes outside normal working hours. Courses are now also delivered online and e-learning is available for a number of subjects.</p> <p>CEC have four locations based on HSC sites. These are neutral venues. The majority of programmes are now offered via an online platform. E-learning is also available for a number of subjects.</p> <p>Programmes, the content of which may be uncomfortable for some participants (e.g. HIV&amp; STI Awareness) are not mandatory programmes. It will be the choice of the individual whether or not to attend. The majority of programmes are now offered via an online platform. E-</p>

<p><b>Ethnicity:</b> CEC will issue all teaching staff with key contacts (i.e. the Translation Service) to share with participants who may come in to contact with their service area. As detailed in 2.3, the HIV &amp; STI Awareness Workshop provides participants with information and statistics which highlights specific issues of ethnicity.</p> <p><b>Sexual orientation:</b></p>	<p>learning is also available for a number of subjects.</p> <p>When applying for a CEC programme via <a href="http://www.cec.hscni.net">www.cec.hscni.net</a>, an applicant identifies if they have a disability. This is then highlighted to the teacher and administrator so adjustments can be made in discussion with the participant. For example:</p> <ul style="list-style-type: none"> <li>- a participant with dyslexic would be provided with materials in an appropriate format.</li> <li>- programme location and requirements would take account of any participants identifying as having a physical disability.</li> <li>- loop facilities are available across CEC to assist participants with hearing impairment.</li> </ul> <p>CEC will issue all teaching staff with key contacts (i.e. the Translation Service) to share with participants who may come in to contact with their service area.</p> <p>Programmes, the content of which may be uncomfortable for some participants (e.g. HIV&amp; STI Awareness) are not mandatory programmes. It will be the choice of the individual whether or not to attend.</p> <p>All CEC programmes are delivered sensitively and all CEC staff are required to complete mandatory training on equality (Equality &amp; Human Rights Awareness: Making a Difference programme).</p>
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**HSC Clinical Education Centre Education Code of Dress Policy (2020)**

<p><i><b>In developing the policy or decision what did you do or change to address the equality issues you identified?</b></i></p>	<p><i><b>What do you intend to do in future to address the equality issues you identified?</b></i></p>
<p><b>Gender:</b>            In order to meet the needs of transgender staff outlined above, the policy has been designed to be gender neutral, consisting of a polo shirt and trousers in order to avoid mis-gendering staff who are transitioning. This will promote mobility, safety and comfort of the wearer and provide an increased level of adherence to current infection prevention and control guidelines.</p> <p>Also, garments will be available from the supplier in a larger size in order to ensure a comfortable and safe fit for pregnant staff delivering CEC programmes.</p> <p><b>Religion</b>            The policy takes account of the needs of those whose religion includes the wearing of a veil, head scarf etc. CEC teaching staff who wear head scarves/turbans for cultural or religious reasons, must ensure they are always in a clean tidy condition and well secured to ensure there are no difficulties when delivering clinical programmes</p> <p><b>Disability:</b></p>	<p>Senior Education Managers will monitor compliance with this policy and provide feedback and assurance at CEC Senior Leadership Team Meetings.</p> <p>A Survey Monkey will be conducted with teaching staff on a six month basis to review the implementation of the Dress Code Policy and review the equality implications highlighted in this screening.</p>

<p>Staff uniform will be available from the supplier in various sizes (including larger sizes) in order to ensure a comfortable and safe fit for staff with disabilities.</p>	
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### HSC Clinical Education Centre Education Delivery Plan 2021/22 (Mental Health and Learning Disabilities Programmes)

<p><i>In developing the policy or decision what did you do or change to address the equality issues you identified?</i></p>	<p><i>What do you intend to do in future to address the equality issues you identified?</i></p>
<p><b>Gender:</b> Females are more likely to have caring responsibilities than males, and are more likely to work part time. This may have an impact of the timing and duration of programmes as well where they are delivered.</p> <p><b>Dependents:</b> Staff and service users who are carers of an individual with a longstanding health issue or who are parents may find it more difficult to attend training outside their local area, due to their caring responsibilities. They may also be restricted as to times when they can attend training. CEC will continue to offer half day/ short duration programmes. This will address the needs of carers, and those who work part time. A small number of courses last more than 30 hours but these do not run on consecutive days.</p>	<p>CEC continually gather programme data for example attendance on programmes, teacher names, cancellations, venue information, Did Not Attends (DNAs). This information informs the content of the next year's EDP. Stakeholders and colleagues are engaged in a number of ways:</p> <ul style="list-style-type: none"> <li>- Stakeholder Engagement Event</li> <li>- Service Level Agreement quarterly meetings</li> <li>- BSO Customer Survey (every two years)</li> <li>- Participant programme evaluations</li> <li>- Clinical Education Advisory Group (CEAG).</li> <li>- Co-production of programmes with practitioners and service users</li> </ul> <p>Data from these sources will be used to assess the equality implications</p>

Courses are delivered from four hospital based sites and are delivered in mornings or afternoons. CEC will consider offering programmes outside normal working hours. Courses are now also delivered online and e-learning is available for a number of subjects.

**Religion/ political opinion:**

CEC have four locations based on HSC sites. These are neutral venues. The majority of programmes are now offered via an online platform. E-learning is also available for a number of subjects.

**Disability:**

When applying for a CEC programme via [www.cec.hscni.net](http://www.cec.hscni.net) an applicant is provided with the opportunity to identify a disability. This is then highlighted to the teacher and programme administrator so reasonable adjustments can be made in discussion with the participant. For example:

- a participant with dyslexia would be provided with materials in an appropriate format
- programme location and requirements would take account of any participants identifying as having a physical disability.
- loop facilities are available across CEC to assist participants with hearing

outlined in this screening and any others.

impairment.

Programmes, the content of which may possibly trigger uncomfortable feeling of distress for some participants such as STORM and KUF are not mandatory programmes. It will be the choice of the individual supported by their manager whether or not to attend.

However, staff are made aware of Health and Wellbeing information, including information as to how to access staff counselling services if needed. Crisis helplines can be issued as part of courses that focus on suicide and self-harm.

**Ethnicity:** CEC will issue all teaching staff with key contacts (i.e. the Translation Service) to share with participants who may come in to contact with their service area.

**Sexual orientation**

All CEC programmes are delivered sensitively and all CEC staff are required to complete mandatory training on equality (Equality & Human Rights Awareness: Making a Difference programme).

**ITS Patient Portal**

*In developing the policy or decision what did you do or change to address the equality issues you*

*What do you intend to do in future to address the equality issues you identified?*

<i>identified?</i>	
<p>Gender:</p> <p>Transgender All HSC staff are required to complete the Making a difference training which deals with issues to do with Transgender (reference in next section)</p>	<p>Evaluate the gender breakdown of patients and their representatives at each phase of the project.</p> <p>Encourage females attending the voluntary groups to register for a patient portal account.</p> <p>Provide additional training and support for females with a caring role at a time and place that suits them.</p>
<p>Age</p> <p>The percentage of people living with long-term conditions increases with age and the reluctance/ inability for this age group to use online healthcare systems means the Patient Portal project team will need to tailor and address the specific training needs and support provided to this group of users.</p>	<p>Promote the use of the Portal regionally across NI.</p> <p>The nature of the disease often dictates the age of the patient groups i.e. Dementia mostly over 65 years of age. Type 1 Diabetes mostly below 30</p> <p>Provide additional training support to those older patients who want to use the Patient Portal application but are not IT literate.</p> <p>User manual added as a link on the Portal under the help menu.</p> <p>Simple bite size guides added as a link on Portal which show how to perform activities on the portal i.e. register for an account.</p>
<p>Religion</p>	<p>The project team engage with the voluntary sector Patient and Carer groups within all communities, promoting the portal regionally within NI across all areas using local groups on all sides of the community</p>



Political Opinion	Promote the portal regionally within NI across all areas using local groups on all sides of the community
Marital Status	Raise awareness among clinical staff inviting patients to use the portal to consider Marital status when selecting patients and provide additional support and training as required.
Dependent Status	<p>Inform patients and carers that the use of the portal should be used to complement existing information about their relatives care</p> <p>Patient privacy issues and competence to provide an informed consent by their relative is a limiting factor for enrolling patient representatives</p> <p>Training is provided at a time and place convenient to the carer to fit in with demands in their schedules</p> <p>Training provided in various formats i.e. video, face-to-face, user manuals and contact details for advice will be provided</p>
Disability	<p>The Portal is currently a web app but future plans include making it more mobile friendly and enabling fingerprint recognition for login.</p> <p>There is no audio function available at the moment, but this has been added to the Portal enhancement list. Audio format could help alleviate some issues for those who have sight issues or learning disabilities</p>

	<p>Dragon Speak will be embedded on the Patient Portal to aid partially sighted users</p> <p>Computer accessibility options such as instructions to zoom screen size are included in the user guide</p> <p>Patients currently have fewer face-to-face appointments (result of Covid restrictions) functionality is extended to include use of virtual clinics within the portal</p> <p>Post diagnoses – follow up clinic after time to digest diagnoses.</p> <p>All healthcare staff to attend mandatory Disability Awareness training</p>
<p>Ethnicity</p>	<p>Use Big Word translation service for instant translation</p> <p>Patients may request same sex interpreter or health professional if possible – information can be added within Shared Files until a patient space ‘to note their personal information’ becomes available</p> <p>An enhancement request has been raised with the supplier to provide page where patients may add detail preferences for example same sex health care provider</p> <p>English is the only language available although there are translation apps now available which could be used to translate the clinical documents into the preferred language</p>

Sexual Orientation	As mentioned previously in Gender Section: All HSC staff are required to complete the Making a difference training which deals with issues surrounding sexual orientation
Evaluations	Engagement with steering groups for each specialty to define requirement and a post go live user survey.  Project evaluation reports to be sent to participants

### ITS Staff Reintegration

<b>In developing the policy or decision what did you do or change to address the equality issues you identified?</b>	<b>What do you intend to do in future to address the equality issues you identified?</b>
<p>Gender: Women who are pregnant or new mothers will be given the option to work from home.</p> <p>Staff with childcare responsibilities will be considered, flexible arrangements introduced such as longer opening hours and the option to work from home.</p> <p>A Corporate Risk Assessment has been completed. Health and Safety measures have been taken to enable and enforce social distancing in the workplace.</p> <p>Flexible staff rotas have been drafted and communicated to staff to ensure they are supported in their return to the workplace. This will allow any employees who want/need to return to the workplace urgently to do so.</p>	<p>All methods deployed to ensure the wellbeing and safety of employees will be reviewed regularly. Employees will be made aware that they can change their working arrangements</p>

Age: Older staff will be given the option to work from home. Staff with childcare and elderly caring responsibilities will be considered (see below).

A Corporate Risk Assessment has been completed. Health and Safety measures have been taken to enable and enforce social distancing in the workplace.

Flexible staff rotas have been drafted to ensure staff are supported in their return to the workplace.

Marital status: A Corporate Risk Assessment has been completed. Health and Safety measures have been taken to enable and enforce social distancing in the workplace. Flexible staff rotas have been drafted to ensure staff are supported in their return to the workplace. In order to combat isolation, line managers are encouraged to have regular contact and online meetings with all staff in their teams.

Dependent status: Staff with childcare and elderly caring responsibilities will be considered, and flexibility offered in terms of working from home, or extending the hours workplaces are open.

A Corporate Risk Assessment has been completed. Health and Safety measures have been taken to enable and enforce social distancing in the workplace.

Flexible staff rotas have been drafted to ensure staff are supported in their return to the workplace, so that staff with caring responsibilities can fit a

return to the office around their caring responsibilities.

Disability: BSO ITS will work with Corporate Services and landlords to provide braille signage for those with sight problems.

BSO ITS will work with HR to consider the use of face coverings, including clear face coverings for the benefits of those who are deaf, and depend on lip reading.

A Corporate Risk Assessment has been completed. Health and Safety measures have been taken to enable and enforce social distancing in the workplace.

Flexible staff rotas have been drafted to ensure staff are supported in their return to the workplace.

Ethnicity: BAME staff will be offered the option to work from home.

A Corporate Risk Assessment has been completed. Health and Safety measures have been taken to enable and enforce social distancing in the workplace.

Flexible staff rotas have been drafted to ensure staff are supported in their return to the workplace.

Sexual orientation: A Corporate Risk Assessment has been completed. Health and Safety measures have been taken to enable and enforce social distancing in the workplace.

Flexible staff rotas have been drafted to ensure staff are supported in their return to the workplace. This will allow any employees who want/need to return to the workplace urgently to do so.

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**Policy for Service User and Carer Representative Involvement within the HSC Clinical Education Centre**

<i><b>In developing the policy or decision what did you do or change to address the equality issues you identified?</b></i>	<i><b>What do you intend to do in future to address the equality issues you identified?</b></i>
<p><b>Gender:</b> As appropriate a balance of gender will be sought but realising that prevalence as outlined may focus more strongly in a particular gender depending on programme content and impact of the condition being taught e.g. pelvic floor health for applicable for females only.</p> <p><b>Age:</b> All age sectors will be included in any requests for service user/ Carer involvement in programmes</p> <p><b>Dependents:</b> Virtual platforms will be offered to ease the burden on carers and facilitate engagement.</p> <p><b>Disability:</b> CEC sites are DDA compliant and most physical disabilities should not present a barrier</p>	

<p>to engagement. For sensory disability loop system is available and virtual platforms are being adapted to accommodate those with sensory loss. Service users or those attending programmes can avail of sign language interpreting if they are deaf or hard of hearing.</p> <p>Additionally contact details for services such as Lifeline can be made available to service users if deemed appropriate</p>	
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### Retire & Return Policy and Guidelines for Application

<b><i>In developing the policy or decision what did you do or change to address the equality issues you identified?</i></b>	<b><i>What do you intend to do in future to address the equality issues you identified?</i></b>
<p><b>Disability:</b> In line with BSO's Accessible Formats Policy, BSO will provide alternative formats on request to meet the needs of people with a disability who may need information in an accessible format.</p> <p><b>Age:</b> Retire and return policy is bound by legislation and is difficult for BSO to mitigate. To mitigate this recruitment for the post should commence at the earliest convenience.</p> <p><b>Gender:</b> The policy specifies that "The Director should also demonstrate that they have considered alternative methods of covering the vacant role e.g. offering current employees the chance to increase hours." (p.14) This would provide opportunities for part-time staff, who tend to be predominately female, many of whom</p>	<p>The Business Services Organisation (BSO) 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>

have caring responsibilities. However to mitigate this recruitment for the post should commence at the earliest convenience.

### Working From Home Policy

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?
<p>Disability: Social interaction will be accessible via virtual means to assist employees working from home. Employees will be provided with technology to assist with WFH. Should an individual experience difficulties setting up equipment at home, a risk assessment can be carried out and a member of their team or line manager give assistance in setting up equipment.</p> <p>Employees with disabilities may be more likely to suffer from mental health issues and isolation, so BSO have a number of online support for staff which are referred to in the WFH policy. This is also communicated via corporate communication on a regular basis.</p> <p>Information from the staff survey found that the corporate communications were effective: over 98% of respondents reported receiving information from the H&amp;WB group, and more than half (53%) had accessed the Health &amp; Wellbeing SharePoint site created by the group.</p> <p>Staff interaction is also vitally</p>	<p>The Business Services Organisation (BSO) 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>A survey is planned to explore the out workings of the pilot WFH policy to see if organisations, managers and teams have been effective in putting in reasonable adjustments and offering support and guidance.</p>



important and this can also be via virtual means. The WFH policy encourages Line Managers to have regular contact with their team members.

There is also a blended approach included in the WFH policy in terms of part office and part home working to assist with social interaction and mental health. Regular WFH staff surveys will be conducted to monitor impact on all section 75 groups.

**Dependent Status:** WFH policy allows for both the employee and organisation to be flexible in terms of working hours and allowing employees with dependents to work outside of normal office hours. Reduced hours and other flexible working arrangements to be considered to assist. Employment breaks may also be a consideration.

Also, to assist those with caring responsibilities who may need greater flexibility in working hours, BSO have opened premises late night and over the weekend. This will be communicated to staff on a regular basis through email.

Mental health may be affected for employees with dependents and there is regular corporate communication relation to the online support services available in BSO. Staff interaction is also vitally important and this can also be via virtual means. There is also a blended approach in terms of part office and part home working to assist with social interaction and mental

health.

**Marital Status:** For married staff with dependents BSO to flexible in terms of working hours and allowing employees with dependents to work outside of normal office hours. Reduced hours and other flexible working arrangements to be considered to assist. Employment breaks may also be a consideration. Social interaction encouraged via technical means such as Zoom meetings and online forums. Employees without a spouse or partner may suffer from isolation and mental health may be affected. For employees experiencing mental health issues there is regular corporate communication relation to the online support services available in BSO. Staff interaction is also vitally important and this can also be via virtual means. There is also a blended approach in terms of part office and part home working to assist with social interaction and mental health.

**Age:** Social interaction encouraged via technical means such as Zoom meetings and online forums. Mental health may be affected for employees and there is regular corporate communication relation to the online support services available in BSO. Staff interaction is also vitally important and this can also be via virtual means. There is also a blended approach in terms of part office and part home working to assist with social interaction and mental health.

**Gender:** Organisation to be flexible in terms of working hours and allowing employees with dependents to work

outside of normal office hours. WFH policy allows for both the employee and the organisation consider reduced hours and other flexible working arrangements. Employment breaks may also be a consideration. BSO encourage interaction with staff and are happy to alter working arrangements if required. This includes full working from home, flexible outside of normal hours working, combination of home and office working or full time office working.

BSO also have a number of online support services to cover all aspects of home working and has particular support services for Employees who may or may know someone who is experiencing domestic abuse. Extra support services have been set up in order to assist employees through COVID. All are available via an online support hub and regular communication is circulated to remind employees of the services available. Management will regularly review WFH arrangements. However the policy does set out terms for a blended approach of both home and office working, reviewed in line with government guidelines. Mental health may be affected for employees and there is regular corporate communication relation to the online support services available in BSO. Staff interaction is also vitally important and this can also be via virtual means. The WFH policy also includes a blended approach in terms of part office and part home working to assist

with social interaction and mental health, offering employees who may be experiencing difficulties at home the flexibility to work in the office or at home.

**Sexual Orientation:**

BSO encourage interaction with staff and are happy to alter working arrangements if required as per WFH policy and other flexible working policies. This includes full working from home, flexible outside of normal hours working, combination of home and office working or full time office working. BSO also have a number of online support services to cover all aspects of home working. Mental health may be affected for employees and there is regular corporate communication relation to the online support services available in BSO. Staff interaction is also vitally important and this can also be via virtual means. There is also a blended approach in terms of part office and part home working to assist with social interaction and mental health.

