

## Equality and Human Rights Screening Template

NIMDTA 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.

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

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

# 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

**Conflict, Bullying and Harassment Policy and Procedure**

### 1.2 Description of policy or decision

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

The document provides guidance to managers and employees in relation to Conflict, Bullying and Harassment and seeks to provide all staff, particularly those with management responsibility how to handle conflict, bullying and harassment issues in line with best practice and Employment Law and to create and maintain a safe, harmonious, positive and enabling working environment for all. The document is designed to:

- ensure consistency of approach across NIMDTA.
- provide a mechanism to facilitate prompt resolution of issues that may arise.
- Prevent bullying and harassment of all staff members including agency workers

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

Promoting a working environment which is safe, harmonious, positive and characterised by fair treatment, strong teamwork, open communication, personal accountability and development opportunities.

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

Disability Discrimination Act 1995

Employment Equality (Sexual Orientation) Regulations (NI) 2003

Equality Act (Sexual Orientation) Regulations (NI) 2006

Employment Equality (Age) regulations (NI) 2006

### **1.3 Main stakeholders affected (internal and external)**

This policy applies to all full time and part-time employees of NIMDTA, contracted and third parties (including agency staff) and other staff on placement with NIMDTA. NIMDTA holds records in relation to its staff, doctors and dentists in training, and in relation to its various functions.

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

The policy should be read alongside the following policies:

- **what are they? (This list is not exhaustive)**

- Disciplinary Policy
- Grievance Policy
- Capability Procedure
- Equality Scheme
- Code of Conduct for Staff
- Department circulars
- Legislative changes

- **who owns them?**

- NIMDTA, HSC, DoH, 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.**

- Organisation wide staff equality data
- Census data (2011)
- Gender Identity Research and Education Society (GIRES)
- Northern Ireland Life and Times survey data, 2016
- CarersNI data
- Regional Conflict Bullying and Harassment monthly meetings took place to discuss and construct policy and procedure
- Engagement with representatives of all Section 75 Groups, this was conducted via Joint Negotiating forums (JNF) and other meetings with representation of the section 75 groups. Policy development was also explored with the Tapestry Network
- Rainbow Project Research and Publications.
- Research Reports <https://www.cipd.co.uk/knowledge/fundamentals/emp-law/harassment/factsheet>
- NI Health Survey 2017/18
- A workshop was held in February 2017 with a range of stakeholders, including trades unions and management. In April/May 2017 a series of focus groups with staff took place across a number of Trusts. Extensive consultation with a range of stakeholders on the draft policy happened from Sept 2017 through to Dec 2018.

## 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.**

<b>Category</b>	<b><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></b>
Gender	<p><b><u>Staff</u></b></p> <p>As at September 2020:</p> <p>Male: 42.22% Female: 57.7%</p> <p><b><u>Population of NI</u></b></p> <p>The proportion of females in 2011 is 51.00% (923, 540). The male population is 49.00% (887, 323) in 2011.</p> <p>Transgender data:</p> <p>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> <ul style="list-style-type: none"> <li>• gender variant to some degree 1%</li> <li>• have sought some medical care 0.025%</li> <li>• having already undergone transition 0.015%</li> </ul> <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). Applying GIREs figures to NI population (using NISRA mid-year population estimates for June 2019) N=1,862,100:</p> <ul style="list-style-type: none"> <li>• 18,621 people who do not identify with gender assigned to them at birth</li> <li>• 466 likely to have sought medical care</li> </ul>

- 279 likely to have undergone transition.

Age

**Staff**

16-24	14.98%
25-29	38.84%
30-34	23.57%
35-39	9.18%
40-44	4.54%
45-49	3.00%
50-54	2.42%
55-59	1.64%
60-64	1.06%
>=65	0.77%

**Population of NI**

0-15	20.95%	379,378
16-19	5.61%	101,589
20-24	6.96%	126,036
25-29	6.85%	124,044
30-44	20.65%	373,943
45-59	19.21%	347,867
60-64	5.21%	94,346
65-74	8.04%	145,593
75-84	4.79%	86,740
85-89	1.17%	21,187
90 and over	0.56%	10,141

Religion

**Staff**

Perceived Protestant	0.00%
Protestant	22.90%
Perceived Roman Catholic	0.00%
Roman Catholic	23.19%
Neither	14.69%
Perceived Neither	0.10%
Not assigned	39.12%

	<p><b><u>Population of NI</u></b></p> <p>Religion or Religion brought up in</p> <ul style="list-style-type: none"> <li>• 45.14% (817, 424) of the population were either Catholic or brought up as Catholic.</li> <li>• 48.36% (875, 733) stated that they were Protestant or brought up as Protestant.</li> <li>• 0.92% (16, 660) of the population belonged to or had been brought up in other religions and Philosophies.</li> <li>• 5.59% (101, 227) neither belonged to, nor had been brought up in a religion.</li> </ul>																
Political Opinion	<p><b><u>Staff</u></b></p> <p>Full data not available</p> <p><b><u>Population of NI</u></b></p> <p><b>Nationality</b></p> <ul style="list-style-type: none"> <li>• British only – 39.89% (722, 353)</li> <li>• Irish only – 25.26% (457, 424)</li> <li>• Northern Irish only – 20.94% (379, 195)</li> <li>• British and Northern Irish only – 6.17% (111, 730)</li> <li>• Irish and Northern Irish only – 1.06% (19, 195)</li> <li>• British, Irish and Northern Irish – 1.02% (1847)</li> <li>• British and Irish only – 0.66% (11, 952)</li> <li>• Other – 5.00% (90, 543)</li> </ul>																
Marital Status	<p><b><u>Staff</u></b></p> <table border="1" data-bbox="320 1626 927 1989"> <tr> <td>Divorced</td> <td>0.77%</td> </tr> <tr> <td>Mar/CP</td> <td>33.91%</td> </tr> <tr> <td>Other</td> <td>0.48%</td> </tr> <tr> <td>Seprat</td> <td>0.29%</td> </tr> <tr> <td>Single</td> <td>58.07%</td> </tr> <tr> <td>Unknown</td> <td>6.47%</td> </tr> <tr> <td>Widw/R</td> <td>0.00%</td> </tr> <tr> <td>Not assigned</td> <td>0.00%</td> </tr> </table>	Divorced	0.77%	Mar/CP	33.91%	Other	0.48%	Seprat	0.29%	Single	58.07%	Unknown	6.47%	Widw/R	0.00%	Not assigned	0.00%
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	<p><b><u>Population of NI</u></b></p> <ul style="list-style-type: none"> <li>• 47.56% (680, 840) of those aged 16 or over were married</li> <li>• 36.14% (517, 359) were single</li> <li>• 0.09% (1288) were registered in same-sex civil partnerships</li> <li>• 9.43% (134, 994) were either divorced, separated or formerly in a same-sex partnership</li> <li>• 6.78% (97, 058) were either widowed or a surviving partner</li> </ul>						
<p>Dependent Status</p>	<p><b><u>Staff</u></b></p> <table border="1" data-bbox="320 660 924 797"> <tr> <td>Yes</td> <td>10.92%</td> </tr> <tr> <td>Not assigned</td> <td>46.37%</td> </tr> <tr> <td>No</td> <td>42.71%</td> </tr> </table> <p><b><u>Population of NI</u></b></p> <ul style="list-style-type: none"> <li>• 11.81% (213, 863) of the usually resident population provide unpaid care to family members, friends, neighbours or others because of long-term physical or mental ill – health/disabilities or problems related to old age.</li> <li>• 3.11% (56, 318) provided 50 hours care or more.</li> <li>• 33.86% (238, 129) of households contained dependent children.</li> <li>• 40.29% (283, 350) contained a least one person with a long – term health problem or a disability.</li> </ul>	Yes	10.92%	Not assigned	46.37%	No	42.71%
Yes	10.92%						
Not assigned	46.37%						
No	42.71%						
<p>Disability</p>	<p><b><u>Staff</u></b></p> <table border="1" data-bbox="320 1438 924 1574"> <tr> <td>No</td> <td>55.27%</td> </tr> <tr> <td>Not assigned</td> <td>41.26%</td> </tr> <tr> <td>Yes</td> <td>3.48%</td> </tr> </table> <p><b><u>Population of NI</u></b></p> <p>20.69% (374, 668) regard themselves as having a disability or long – term health problem, which has an impact on their day to day activities.</p> <ul style="list-style-type: none"> <li>• 68.57% (1, 241709) of residents did not have long – term health condition.</li> <li>• Deafness or partial hearing loss – <b>5.14% (93, 078)</b></li> <li>• Blindness or partial sight loss – <b>1.7% (30, 785)</b></li> </ul>	No	55.27%	Not assigned	41.26%	Yes	3.48%
No	55.27%						
Not assigned	41.26%						
Yes	3.48%						

	<ul style="list-style-type: none"> <li>• Communication Difficulty – <b>1.65% (29, 879)</b></li> <li>• Mobility of Dexterity Difficulty – <b>11.44% (207, 163)</b></li> <li>• A learning, intellectual, social or behavioural difficulty. <b>2.22% (40, 201)</b></li> <li>• An emotional, psychological or mental health condition - <b>5.83% (105, 573)</b></li> <li>• Long – term pain or discomfort – <b>10.10% (182, 897)</b></li> <li>• Shortness of breath or difficulty breathing – <b>8.72% (157, 907)</b></li> <li>• Frequent confusion or memory loss – <b>1.97% (35, 674)</b></li> <li>• A chronic illness (such as cancer, HIV, diabetes, heart disease or epilepsy. – <b>6.55% (118, 612)</b></li> <li>• Other condition – <b>5.22% (94, 527)</b></li> <li>• No Condition – <b>68.57% (1, 241, 709)</b></li> </ul>
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Ethnicity	<p><b><u>Staff</u></b></p> <table border="1"> <tr> <td>Not assigned</td> <td>40.58%</td> </tr> <tr> <td>White</td> <td>51.69%</td> </tr> <tr> <td>Other</td> <td>3.77%</td> </tr> <tr> <td>Black African</td> <td>0.48%</td> </tr> <tr> <td>Indian</td> <td>1.64%</td> </tr> <tr> <td>Chinese</td> <td>1.84%</td> </tr> </table> <p><b><u>Population of NI</u></b></p> <p><b>.8% 32,596 of the usual resident population belonged to minority ethnic groups,</b></p> <p><b>White – 98.21% (1, 778, 449)</b></p> <p><b>Chinese – 0.35% (6, 338)</b></p> <p><b>Irish Traveller – 0.07% (1, 268)</b></p> <p><b>Indian – 0.34% (6, 157)</b></p> <p><b>Pakistani – 0.06% (1, 087)</b></p> <p><b>Bangladeshi – 0.03% (543)</b></p> <p><b>Other Asian – 0.28% (5, 070)</b></p> <p><b>Black Caribbean – 0.02% (362)</b></p> <p><b>Black African – 0.13% (2354)</b></p> <p><b>Black Other – 0.05% (905)</b></p> <p><b>Mixed – 0.33% (5976)</b></p> <p><b>Other – 0.13% (2354)</b></p>	Not assigned	40.58%	White	51.69%	Other	3.77%	Black African	0.48%	Indian	1.64%	Chinese	1.84%
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Sexual Orientation	<p><b><u>Staff</u></b></p>
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Full data not available for NIMDTA's workforce, but NI population estimate is 10% having a sexual orientation towards same sex.

Both Sexes	0.48%
Do not wish to answer	5.41%
Not assigned	53.82%
Opposite Sex	38.55%
Same Sex	1.74%

### **Population of NI**

Census 2011 does not include this information.

There is variation in estimates of the size of the LGB&T population in Northern Ireland. Estimates are as high as 5-7% (65-90,000) of the adult population in Northern Ireland (based on the UK government estimate of between 5-7% LGB&T people in the population for the purposes of costing the Civil Partnerships Act).

## **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).**

<b>Category</b>	<b>Needs and Experiences</b>
Gender	Individuals working in areas or teams dominated by a gender other than their own may lack the confidence to raise or pursue a complaint under bullying and harassment. Those who are transgender may also find it more difficult to raise a complaint, with concerns about confidentiality regarding their gender status.
Age	Younger members of staff may lack experience in recognising or confidence to report harassment.
Religion	Individuals working in teams dominated by a religion other than

	their own may lack the confidence to raise or pursue a complaint under bullying and harassment.
Political Opinion	Individuals working in teams dominated by people with a different political opinion may lack the confidence to raise or pursue a complaint under bullying and harassment.
Marital Status	Employees who do not have the support of a spouse or partner may lack the confidence in bringing forward a complaint of bullying and harassment.
Dependent Status	There is no data to suggest that there are specific needs or experiences arising within this category.
Disability	Individuals with sight problems will have specific requirements with regards to communication of the policy. Also, those with learning difficulties may require additional support in order to get an understanding of how the policy works and the processes involved.
Ethnicity	It is recognised that cultural differences exist between different ethnic groups, and that staff from minority ethnic groups may be reluctant to report incidents of bullying and harassment. People who do not speak English as a first language may have additional communication needs.
Sexual Orientation	Some LGB staff may be less likely than heterosexual staff to report instances of harassment, particularly if it relates to harassment on grounds of sexual orientation as they may have concerns about having to disclose their sexual orientation.

## 2.4 Multiple Identities

**Are there any potential impacts of the policy or decision on people with multiple identities? For example; disabled minority ethnic people; disabled women; young Protestant men; and young lesbians, gay and bisexual people.**

None identified

## 2.5 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?**

<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>Disability: Ensure that this policy (and others) is in accessible formats for e.g. size 14 for those who are partially sighted and consideration given to all those with disabilities. Also, all staff are to be made aware of the policy, through avenues such as Awareness Sessions. There may be a need for support and any reasonable adjustments to practice to ensure a fair hearing.</p> <p>Age: Younger members of staff may lack experience or confidence to report incidents of conflict, bullying and harassment, and therefore the policy states clearly what constitutes incidents of conflict bullying and harassment and gives examples.</p> <p>Religion: Members of staff who are working in teams dominated by a different religion may lack experience or confidence to report incidents of conflict, bullying and harassment, and therefore the policy states clearly what constitutes incidents of conflict bullying and harassment and gives examples.</p> <p>Political opinion: Members of staff who are working in teams dominated by a different religion may lack experience or confidence to report incidents of conflict, bullying and harassment, and therefore the policy states clearly what constitutes incidents of conflict bullying</p>	<p>For all issues identified under Section 75 it is important that this policy is shared with all, and targeted with the section 75 groups. Therefore communication is key when this policy is released. NIMDTA will continue to gather data in regards on all incidences of Bully and harassment (victims and harassers) and gather equality data in order to monitor the progress of this policy and procedure</p> <p>To ensure the on-going effectiveness of this policy and procedure, a review will be undertaken at regular intervals, and not more than 3 years from the date of implementation.</p>

and harassment and gives examples.

Sexual orientation: In order to give LGB people more confidence in reporting incidences of conflict, bullying and harassment, sexual orientation is clearly defined as a protected Equality Group in the definition of Harassment. Moreover, the policy states that Line managers have a specific responsibility in the prevention and resolution of conflict, bullying and harassment. They are responsible for creating a safe, harmonious and enabling working environment, setting a good example for other staff members to follow, intervening when conflict arises and ensuring that their teams are aware of their obligations and relevant policies.

Ethnicity: It is recognised that cultural differences exist between different ethnic groups, and that staff from minority ethnic groups may be reluctant to report incidents of conflict, bullying and harassment. The policy explicitly states that harassment on is unacceptable behaviour, and there is a possibility of criminal proceedings should Harassment occur. The policy places a responsibility on Line Managers in prevention and resolution of conflict, bullying, or harassment.

Any additional communication needs of those who do not speak English as a first language will be considered and translation services available if requested.

Marital status: Employees who do have the support of a spouse or

<p>partner may lack the confidence in bringing forward a complaint of bullying and harassment. However, the policy emphasises all employees' play a vital role to play in the creation, promotion and maintenance of a good harmonious working environment. Other sources of support include confidential counselling provided via the employee assistance programmes.</p> <p>Gender: In some scenarios a Conflict, Bullying and Harassment policy may provide the support for those working in areas that may be dominated by other genders, i.e. where they are the minority. Examples of different forms of Conflict, Bullying and Harassment are described in the policy. Also, for those who are transgender, the policy is clear in that all complaints will be dealt with seriously, promptly and confidentially. The policy aims to have a positive impact in that it provides a mechanism for the prompt resolution of issues that may arise and to prevent future recurrence through on going monitoring arrangements.</p>	
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## 2.6 Good Relations

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

<b>Group</b>	<b>Impact</b>	<b>Suggestions</b>
Religion	None	None
Political Opinion	None	None
Ethnicity	None	None

**(3) SHOULD THE POLICY OR DECISION BE SUBJECT TO A FULL EQUALITY IMPACT ASSESSMENT?**

A full equality impact assessment (EQIA) is usually confined to those policies or decisions considered to have major implications for equality of opportunity

**How would you categorise the impacts of this decision or policy? (refer to guidance notes for guidance on impact)**

**Please tick:**

Major impact	
Minor impact	x
No further impact	

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

**Please tick:**

Yes	
No	X

Mitigation is in place in relation to any impacts identified during the screening process for the Section 75 groups. It is not thought that subjecting the policy to an EQIA will present 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	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	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	Yes
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 <sup>st</sup> protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property	NO
1 <sup>st</sup> 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
10	Yes	Inhibited in line with promoting harmonious working environment	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.**

Ensure staff complete Making a Difference ELearning modules and read the appropriate documentation circulated. Ensure behaviour accords with the principles laid down in the Equality, Diversity and Inclusion policy and other related policies. Read relevant published information via the following mediums below:

- Corporate Communications
- Awareness Sessions
- Staff inductions
- Publish on intranet

**(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)?**

<b>Equality &amp; Good Relations</b>	<b>Disability Duties</b>	<b>Human Rights</b>
Conflict, Bullying and Harassments issues, either formally or informally, raised by any employees from any of the Section 75 groups	Quarterly report to NIMDTA Board on incidents and/or trends	

Approved Lead Officer: Roisin Campbell

Position: Senior Professional Support Manager

Date: 12/11/2020

Policy/Decision Screened by: Gillian Dennison

**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:

**Informationrequest.nimdt@hscni.net**