



Northern Health  
and Social Care Trust

# **Consultation Feedback Report**

**Report detailing feedback received from consultation on  
Health and Social Care Trusts' Action Based Plans 2014  
– 2017 and Disability Action Plans 2014 - 2017**

**July 2014**

## **Acknowledgements**

The Health and Social Care Trusts would like to take this opportunity to thank all those who participated in the regional Section 75 Action Based Plan and Disability Action Plan consultation process – both those who attended the stakeholder event and those who responded in writing. This invaluable input and expertise has helped to shape our final Plans.

## **Alternative Formats**

This report is available in alternative formats on request.

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## 1.0 Introduction and Background

Section 75 of the Northern Ireland Act 1998 requires the all health and social care (HSC) trusts, when carrying out their work, to have due regard to the need to promote equality of opportunity between nine categories of persons, namely:

- between persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation;
- between men and women generally;
- between persons with a disability and persons without; and
- between persons with dependants and persons without.

This commitment to Section 75 is demonstrated through the Trusts' Equality Scheme and associated Action Based Plans.

In addition, under Section 49A of the Disability Discrimination Act 1995 (DDA 1995) (as amended by Article 5 of the Disability Discrimination (Northern Ireland) Order 2006), the Trusts are required, when carrying out their functions, to have due regard to the need to:

- Promote positive attitudes towards disabled people; and
- Encourage participation by disabled people in public life ('the Disability Duties').

Under Section 49B of the DDA 1995, Trusts are also required to submit to the Equality Commission a Plan showing how they propose to fulfil these duties in relation to their functions. This is known as a Disability Action Plan (DAP) and it demonstrates how the Trusts will fulfil their duties to promote positive attitudes towards disabled people; and to encourage participation by disabled people in public life.

The Belfast Health and Social Care Trust (BHSCT), Northern Health and Social Care Trust (NHSCT), South Eastern Health and Social Care Trust (SEHSCT), Southern Health and Social Care Trust (SHSCT), Western Health and Social Care Trust (WHSCT), and Northern Ireland Ambulance Service (NIAS) have worked collaboratively to develop their Action Based Plans and Disability Action Plans to tackle identified inequalities in health and social care. The Trusts have built on the actions of their previous Plans, progress against which has been documented in Trust Annual Progress Reports submitted to Equality Commission for Northern Ireland (ECNI) which are available on the Trusts websites.

The Trusts have consulted widely on their Action Based Plans and Disability Action Plans through a stakeholder engagement event and over a 12 week period beginning from 26 March 2014 to 19 June 2014. A full copy of all consultation documents can be found on the Trusts' websites.

The purpose of this report is to summarise responses to the consultation process and demonstrate how the feedback shaped the final documents.

## **1.1 Equality in Action – Stakeholder Engagement Event**

The Trusts felt it was important to continue the established dialogue and engagement with the local community and with those who have an interest in how we provide health and social care services. This on-going engagement and partnership working has been instrumental in the development of the Plans.

The Trusts held a pre-consultation event on 26 March 2014 at the Skanios Centre, Belfast. Pamela Montgomery, Non –Executive Director for NHSCT chaired the event and speakers included Patrice Hardy, Equality Manager, ECNI and Patricia Bray, Statutory Duty and Policy Officer at Disability Action. Participants were also shown a DVD ‘Section 75 – Your Stories’ which highlighted personal experiences of how Section 75 has impacted on a number of people.

A wide range of stakeholders were invited to the event and the programme (Appendix 1) provided the opportunity for participants to hear how the Plans were drafted and to provide feedback via a graffiti wall (see Appendix 3). All the feedback received has been considered and incorporated in the Plans. A list of those who attended can be found in Appendix 2.



**Participants at Stakeholder Engagement Event – 26 March 2014**



**Speakers at Stakeholder Engagement Event  
26 March 2014**

## **1.2 Formal Twelve Week Consultation**

In addition to the pre-consultation Stakeholder Engagement Event, the HSC Trusts formally consulted collaboratively on their Draft Action Based Plans and Disability Action Plans. This twelve week consultation period ran from 26 March 2014 to 19 June 2014. During the formal consultation responses were received from the following organisations.

- ECNI (Equality Commission for Northern Ireland)
- Disability Action
- NIACRO (Northern Ireland Association for the Care and Resettlement of Offenders)
- NIAMH (Northern Ireland Association for Mental Health)
- RNIB
- Hands that Talk
- NI Rare Disease Partnership

## 2.0 Consultation Feedback

### Comments received on S75 Action Based Plans

Feedback received	Trusts' response
<b>ECNI</b>	
Welcomes that the Trusts have followed their advice in relation to the Audit of Inequalities and outcomes.	The Trusts' Emerging Themes – Audit of Inequalities is updated annually and available on all Trust websites.
Welcomes the inclusion of local actions	While Trusts continue to work collaboratively in order to maximise both resources and a consistent impact, they are committed to identifying local actions to ensure local issues are addressed.
Welcome that Trusts have aligned the timeframe for the delivery of the action plans with their corporate and business planning cycles, and that implementation of the action measures has been incorporated into business planning cycles.	Please note that Trusts have also aligned the timeframe of the Disability Action Plans to their corporate and business planning cycles.
Not immediately clear how the Trusts have prioritised the inequalities and associated actions in their Plans.	It has now been clarified in Action Based Plans that actions have been prioritised by consideration of the Emerging Themes Document – Audit of Inequalities and current workstreams being rolled out within HSC Trusts. Feedback gathered from the pre-consultation and 12 week consultation process will shape the final list of priorities.
Trusts should include as summary of the Audit of Inequalities as part of Action Based Plans.	The Action Based Plan explains how the Trusts have identified actions that will have the greatest impact within the timescales. The Emerging Themes Document – Audit of Inequalities is available for consultees on the Trusts' website.
Welcome fact the Trusts are continuing to develop mechanisms to monitor and evaluate uptake of services by people from minority ethnic backgrounds.	Trusts are mindful of the importance of monitoring service provision and employment across the 9 equality categories. All Trusts now monitor staff across the 9 equality categories and are

	committed to continually improving monitoring data in relation to service provision.
Add summary of monitoring and key outcomes from previous Action Based Plans.	All actions are subject to regular and formal annual review. Progress is reported in the S75 Annual Progress Report to ECNI
Clarify in Action Based Plans which actions are new/on-going.	Noted and differential between new and on-going actions have been incorporated into Action Based Plans.
Trusts should consult on any substantive changes made to screening and EQIA templates.	Trusts are committed to working with ECNI on the new screening template and to full and effective consultation with stakeholders.
ECNI acknowledges that the Trusts have collated and reviewed a considerable amount of equality-based research and evidence in their Emerging Themes Document.	Trusts are committed to reviewing and updating the Emerging Themes Document annually.
Trusts should consider the ECNI updated statement on key inequalities in health and social care when it becomes available	Trust will consider the updated statements and revise/update the Action Based Plans as required.
ECNI pleased to note Trusts' actions to meet the particular needs of LGB&T people.	Trusts are committed to working in partnership with individuals and representative organisations to ensure services are accessible to everyone. The Trust will continue to support the LBBT Staff Forum.
Welcome Trusts' commitment to considering recommendations of the University of Ulster's research into gender equality issues and recommend they are reflected in Action Plans.	Noted and added to Action Based Plan.
Recommend Trusts work with DHSSPS to consider the recommendations included in the ECNI 'Shadow Report to the Committee on the Elimination of Discrimination Against Women' (CEDAW) June 2013 and the Executives Gender Equality Strategy.	Noted and added to Action Based Plan.
Welcomes Trusts' partnership working with BME groups to identify and address health and social care issues affecting	The Trusts are committed to the on-going partnership working to identify and implement models of good practice.

these communities and the development of Multi-Cultural and Beliefs Handbook and Cultural Competence in Mental Health Services action	
Flexible childcare should be extended to other Section 75 categories.	Action targeted specifically at BME communities to address lack of suitable childcare
Recommend that the Trusts consider the findings of the UN Convention on the Rights of Persons with Disabilities (UNCRPD) research currently being carried out by Queen's University Belfast.	The Trusts will consider the research when completed and incorporate where relevant into the Action Plans.
Should include actions to progress ECNI formal investigation into Accessibility of Health Information for People with Learning Disability in NI.	This Action is addressed in the communication section of the Trusts' Disability Action Plans and was one of the key drivers for the development of the regional guidance on "Making Communication Accessible for All"
Recommend that Trusts review and align specific measures /actions in their S75 Action Plans and Disability Action Plans.	Trust representatives continue to participate on the Regional Physical Sensory and Disability Strategy Implementation Group to direct, coordinate and manage the project infrastructure and implementation of the Physical and Sensory Disability Strategy and Action Plan
Recommend Trust consider the findings of research carried out by the Centre for Accessible Environments.	Trusts will review the findings of this research when published and include action measures in Action Based Plans where relevant.
Welcome commitment to complying with the Commission's guidance on Equality of Opportunity and Sustainable Development in Public Sector Procurement but would seek clarification on development of easy read Procurement Guidelines.	Noted and updated in Action Based Plans
Clarification required of measures taken to achieve target of care leavers who are in education, training or employment.	Noted and updated in Action Based Plan. Information on the targets is also provided in the Trusts' Annual Progress Reports which are available on Trust websites.
Welcome continued provision of equality training for staff, the continued promotion of the LGB&T Staff Forum and the	Trusts are committed to so supporting these initiatives.

development of a regional transgender policy.	
Would suggest that given the size of the Trusts' workforce, more challenging targets should be set to encourage more disabled people into employment.	The Trusts will continue to work with relevant organisations to examine and address this issue.
Recommend that Trusts consider ECNI policy position papers on sexual orientation, race, CEDAW and disability, and map against action already prioritised in audit of inequalities.	Trust will consider all position papers when launched by ECNI and add to Emerging Themes Document. Action Plans will be amended where relevant.
<b>Disability Action</b>	
Recommendation to take cognisance of formal responses received during consultation.	Plans have been amended in the light of stakeholder event and formal responses received during consultation.
Information requested on Trusts plans for providing British Sign Language (BSL) and Irish Sign Language (ISL) support.	The Trusts are involved in the Regional Support Services Review (RCSSR) Task and Finish Group established to scope and review sign language communication support services provision for health and social care in Northern Ireland. The review will develop a regional minimum standard for future commissioning and delivery of services. The review process includes engaging with service users in relation to the range of options identified and completion of value for money appraisal on each option. An action relating to this work is included in the Trusts' Disability Action Plans
Action 2 requires clarification on Trusts' input to the Disability Strategy Steering Group Action Plan.	This action has been updated in the Action Based Plans and will continue to be led by the Health and Social Care Board.
Action 5 to be further developed to include people with disabilities to determine content of proposed tool kit.	This action is being further developed in the Action Based Plans. The toolkit will be reviewed annually in partnership with people with disabilities and representative organisations. Trusts continue to utilise the "Making Communication Accessible for All".

Advises there is a need to improve disability monitoring.	Trusts now monitor staff by all S75 equality categories. The new Human Resources, Payroll, Travel and Subsistence (HRPTS) system is now live within Trusts. Staff will be able to maintain and change their disability information in HRPTS, which will support accurate reporting. The Trust will continue to work to improve monitoring in relation to service delivery.
Emphasis on online information systems may not be appropriate – would advise that disabled and older people do not have economic power to purchase computers.	The Trusts will continue to work with representative organisations to ensure that information is available in an accessible format. All written reports and documents are available on request in a range of alternative formats including large print, daisy disc, Braille, audio and translation into minority ethnic languages.
Low uptake of training should be reviewed and updated to include traditional delivery methods of training.	Trusts use a range of methods to deliver training and increased awareness of equality and disability duties including leaflets/newsletters, face to face training and where appropriate e-learning. NHSCT face to face disability equality training is delivered in partnership with disabled people. Information on the range of training delivered each year is available in Trusts S75 Annual Progress Reports.
Regarding procurement it is recommended that a social clause be included in award contract to address underrepresentation of disabled people in the workplace.	A social clause is included where appropriate and Trusts will work with relevant Trust staff to examine this issue further.
Positive actions should include ring-fencing of jobs, placements, job sampling and working with voluntary/community sectors e.g. supported employment	The Trust's Day Opportunities Programme works in partnership with a number of government and voluntary/community programmes to support disabled people in work placements and employment.
Disability is of equal standing as other hate crime categories and initiatives to address disablism must be included.	Trust would welcome the opportunity to work with representative groups and disabled people to examine this issue further.

Trusts' recruitment and selection policies should be reviewed to determine barriers to disabled people being employed.	The Trust's employment policies are subject to regular review. Recruitment and selection procedure promote reasonable adjustments and are reviewed to ensure access for job applicants. The introduction of the Regional Recruitment Policy means that future recruitment exercises will be led and facilitated by Business Services Organisation (BSO). Trusts' will share this recommendation with relevant BSO officers to promote good practice and consistency across the sector.
Domestic Violence Policy should take cognisance of issues for people with disabilities who are impacted by domestic violence.	Noted and Domestic Violence Policy to be reviewed in light of comments.
Action measure required on the collection of data to address gaps in information/data.	The issue of data gaps is a standing item for discussion at the regional Equality and Human Rights Steering Group. The functionality and alignment of the range of information systems in each Trust continues to be examined regionally in order to address the current gaps.
<b>NIACRO</b>	
Welcome the Emerging Themes Document however inequalities highlighted in this document should be reflected in Action Based Plans.	The Emerging Themes document has been developed to assist the prioritisation of the Action Based Plans. Priorities in the Plans have been identified through on-going involvement with disabled people and representative organisations and feedback from consultees.
Trusts should acknowledge the contribution they can make to the desistance agenda and the overall NI Executive Reducing Offending Framework.	<p>The function of Action based Plans is to demonstrate the Trusts' commitment to having to have due regard to the need to promote equality of opportunity between nine categories of persons, namely:</p> <ul style="list-style-type: none"> <li>• between persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation;</li> </ul>

	<ul style="list-style-type: none"> <li>• between men and women generally;</li> <li>• between persons with a disability and persons without; and</li> <li>• between persons with dependants and persons without.</li> </ul>
SEHSCT Action Based Plan should include information on reducing health inequalities for people in prison.	Noted and added to SEHSCT Action Based Plan.
Recommend that there needs to be greater statutory recognition of the needs of families of people in prison and call for this groups' needs to be recognised in legislation.	This is outside of the Trusts' remit however this issue will be incorporated in the Emerging Themes Document.
Should be statutory responsibility to record the needs of children and young people affected by parental imprisonment.	Noted – see above
Early intervention in relation to children and young people isn't referenced in Emerging Themes Document or Action Based Plans	Noted and added to Emerging Themes Document.
Recommend inclusion of needs of Looked After Children in Action Based Plan.	Details of how the needs of Looked After Children are addressed by the Trusts are detailed in Corporate Social Responsibility Action Plans.
Recommend Action Based Plans should include how Trusts will treat conviction information and apply greater transparency in the recruitment and selection process.	The introduction of the Regional Recruitment Policy means that future recruitment exercises will be led and facilitated by BSO – recommendation will be forwarded to relevant officers.
<b>NI Rare Disease Partnership</b>	
Query with regard to regional consultation process	The partnership was invited to the Stakeholder Engagement Event on 26 March 2014 and included in the formal 12 week consultation. The Trusts look forward to inviting the partnership to the Regional Equality and Human Rights Steering Group to examine how we can work together to raise awareness of Rare Diseases.
Rare diseases should be Section 75 category.	This is beyond the remit of the Trusts. The legislation in the NI Act 1998 details the Section 75 categories.

## Comments received on Disability Action Plan

Feedback received	Trusts' response
<b>ECNI</b>	
ECNI welcomes general approach taken by Health Trusts	Collaborate approach will continue during implementation of the Plans
Trusts should provide more detail in their Disability Action Plans on the mechanisms they have already established for disabled people to be involved in decision making.	Noted and now detailed in Disability Action Plans
The actions under public life measures should detail how they relate directly to encouraging the participation of disabled people in public life.	Noted and now detailed in Disability Action Plans
Plans should refer to Disability Equality training rather than Disability Awareness training	Noted and now detailed in Disability Action Plans and reflected in future training
Trusts should provide more detail on training that will be delivered over the course of the Plan	Noted and detailed in Disability Action Plans
With regard to employment targets the overall numbers are relatively small in comparison with overall staff levels and ECNI would welcome more ambitious targets	The Trusts will continue to work with their Human Resource Departments and representative organisations to improve overall numbers.
In relation to positive work Trusts plan to carry out in supporting World Autism Day, Trusts should outline in more detail how this will encourage participation in public life and promote positive attitudes	Noted and detailed in Disability Action Plans
<b>Disability Action</b>	
Plans should refer to Disability Equality training rather than Disability Awareness training	Noted and now detailed in Disability Action Plans and reflected in future training
Baseline information should be used to provide holistic picture of the scope of disabled people involved to identify how the Trust will use its influence in relation to public life positive actions.	Noted and more detail now provided in Disability Action Plans

Regarding previous measures for both duties – Trust DAPs provide an opportunity to identify what has and hasn't worked to ensure practical outcomes.	The Trusts note this matter and will establish thematic workshops with disabled people and representative organisations to identify the most effective measures.
Request information on specific engagement with disabled people and their representative groups on his DAP.	Specific methods of engagement are detailed in Disability Action Plans.
Request information on involvement structures and numbers of disabled people involved and learning to date.	More details on involvement have been added to Disability Action Plans. In addition Trusts compile an Annual Progress Report to the Equality Commission for NI and a Personal and Public Involvement Annual Report (which are both available on all Trust websites) which provides information on involvement structures.
Further information required on what has been completed and is still outstanding.	Disability Action Plans include a section outlining a review of previous Plan.
Timescale for action relating to alternative formats is too long	Trusts will continue to review timescales in plans to ensure that outcomes are realised as quickly as possible.
Detail how Trusts intend to involve people with disabilities specifically in implementation, monitoring and review of Disability Action Plans	The Trusts notes this matter and will establish thematic workshops with disabled people and representative organisations to ensure effective involvement. Now noted in Disability Action Plans.
Queried if existing training materials will be updated for life and recommends other traditional methods of training. Highlighted absence of timescale.	Training material is continually reviewed. NHSCT Disability Equality Training programme in reviewed and delivered in partnership with disabled people and representative organisations
Reasonable adjustment action is a DDA obligation and should not be duplicated.	Noted and now clarified in Disability Action Plans.
Ongoing timescales should be replaced by specific actions, dates and clear performance indicators.	Noted - Trusts will replace term "on-going" with a specific timeline.
Performance indicators should be SMART.	Trusts have revisited all the actions and adjusted accordingly.

<b>Hands that Talk</b>	
Welcome review of guidance and policies on provision of interpreting support but do not feel action is specific enough as an action measure	Trusts are committed to ensure that people who are deaf and hard of hearing are supported appropriately to access services. Acton has been reviewed and amended to make it more specific.
Raising awareness of Code of Courtesy is insufficient and Trusts should implement Code.	Noted and amended in Action Based Plan
Recommend additional measure should be added to ensure best practice guidelines on providing public services to deaf people who use BSL or ISL are adhered to.	Noted and included in DAP along with Trusts continued use of Making Communication Accessible Guidelines.
The needs of sign language community should form part of staff awareness training and cognisance taken of literacy levels amongst deaf community.	Trusts provide Working Well with Interpreters training in conjunction with NIHCIS and also provide sign language interpreters for any public consultation events. Trusts work with Action on Hearing Loss to address any issues.
Equality issues relating to the Deaf sign language community should not be solely dealt with through the Physical and Sensory Disability Strategy	Equality issue of Deaf sign language community are considered in a number of ways as detailed in Trust Equality Schemes and Annual Progress Reports.
Working Well with Interpreters training should take cognisance of fact that literacy rates in English are poor amongst the Deaf sign language community	Working Well with Interpreters training was developed to support the use of ethnic minority language interpreting.
Recommend that Trusts use information and networks of communication available from Hands that Talk to raise awareness of complaints process.	Trusts welcome the opportunity to use Hands that Talk Networks in future.
<b>NIAMH</b>	
Welcome Trusts' partnership approach to developing the Plans and its full endorsement by Trust Boards	Trusts welcome the opportunity to work with NIAMH in the implementation and monitoring of the Plans.
Trusts should develop a mechanism to engage with people with lived experience of mental ill-health	Mechanisms of involvement are detailed in the Action Based Plans
Anti-stigma officer should be appointed to lead mental health anti-stigma campaign across HSCT.	In April 2013 the Implementing Recovery through Organisational Change (ImROC) programme commenced across all 5

	HSC Trusts. The ImROC programme is committed to the development of a culture of recovery based practice and will therefore improve the service user and carer experience.
<p>Recommend that Trusts</p> <ul style="list-style-type: none"> <li>• conduct baseline attitudes survey amongst staff</li> <li>• conduct baseline research with employees who have lived experience of mental ill health</li> <li>• conduct baseline research with service users who have lived experience of mental ill health</li> </ul>	The PHA, HSCB and HSC Trusts are working on a collaborative Integrated Mental Health Care Pathway which is currently well progressed and will be rolled out during late 2014. The focus of the new pathways will be Personal Wellbeing Plans where an individual's wider determinates of wellbeing are considered as part of a continuum of care and support as required. A key part of this 'Wellbeing Plan' will be the ability to flex up and flex down support as required to ensure that the overall support package remains person centred and will help ensure that the individual receives appropriate support in a timely manner."
Trusts should develop anti-stigma training and information around stigma and mental health.	The Trusts' equality training programmes including the eLearning Programme "Discovering Diversity" includes awareness of attitudes and beliefs. The Trusts would welcome the opportunity to work with NIAMH to ensure training reflects the anti-stigma issues identified.
Trusts should ensure ECNI/NIAMH workplace mental health materials are in place in Trust sites.	Trusts would welcome the opportunity to work with NIAMH to ensure the material is readily available for staff.
Trusts should ensure implementation of the Perinatal Mental Health Care Pathway in timely manner and develop guidance for mothers.	Trusts will forward this recommendation to the relevant Trust staff.
Trusts should review literature and practice; engage with people who have lived experience of mental ill health to identify the challenges faced in accessing information.	HSC Trusts are also currently reviewing current training and associated leaflets / materials to reflect a human rights approach to disability based on the UNCRPD. This work will be completed within HSC Trusts Disability Actions Plan during period 2014-2017. HSC Trusts also have a statutory duty of Personal

	and Public Involvement and are committed to promoting and increasing service user, carer and public involvement in the planning, design and review of information produced.
Trusts should develop training and guidance for staff on understanding, identifying and responding appropriately to disability hate crime and ensure information on “Be Safe, Stay Safe” and DHC Advocacy Service is available in HSCT sites.	Trusts would welcome the opportunity to work with NIAMH to ensure the material is readily available for staff.
Proactively include take-up of mentoring placement opportunities including people with mental health.	Trusts recognise the value and importance of mentoring placements opportunities and a “peer support” model is well advanced across HSC Trusts as part of the ImRoc Workstreams.
Review appropriateness of learning disability Health Facilitator role for mental health.	The role of Health Facilitators for Mental Health is considered part of the ImROC work streams and within the roll out of Personal Wellbeing Plans. Mental Health Teams will oversee Personal Wellbeing Plans as part of on-going assessment and support based on a holistic and person centred approach.
<b>RNIB</b>	
Do not consider that producing documents in an Easy-read format or ensuring information is accessible in a range of formats is sufficient to meet the needs of blind or partially sighted people. Appointment letters are the starting point for a person’s journey through a hospital system.	The Trusts note your comments and continue to examine how we can meet the requests for email communication. The Trusts would welcome the opportunity to work with RNIB on resolving this issue.
Recommendation for all Trusts to take forward the BHSCT Design Guide	BHSCT will share good practice from the Design Guide and the ‘Review of a Building Initiative’ with all Trusts.
Parents have advised RNIB blind and partially sighted children do not have satisfactory access to AHP services – particularly children with complex needs.	Trusts will forward this recommendation to the relevant Trust staff.

Family support and Parent Education Projects should be provided in all Trusts.	Trusts will forward this recommendation to the relevant Trust staff.
RNIB would like to promote the opportunities for mentorship in HSC organisations.	Trusts will continue to work with the Disability Sector to promote opportunities for mentoring.
RNIB encourages Trusts to commission training for front line staff to improve experiences for blind and partially sighted people	Staff training is reviewed annually and Trusts will ensure this recommendation is fed into the review process.
<b>Action Cancer</b>	
Applauds the goals of the DAPs and welcomes the focus on the active involvement of people with a disability, providing information in a range of accessible formats in attracting, mentoring and employing people with a disability.	Trusts are committed to continuing to promote positive attitudes towards people with a disability and the encouragement of their full participation in public life.
Welcomes the training of health service staff to be able to engage effectively with people with a disability and to create an exemplar facility.	Trusts acknowledge the importance of delivering person centred and responsive services and that health and social care staff must be adequately equipped to facilitate this.
Recommendation in relation to action on promotion of health of people with a learning disability (PWLD). It only has 2 sub actions. Given significant health inequalities faced by people with a learning disability, Action Cancer would recommend that Trusts would take cognisance of Improving Health and Lives: Learning Disabilities Observatory and include further sub actions to improve early identification of illness among PWLD by increasing uptake of health checks and health promotion programmes and to enhance the health literacy of PWLD	Noted and Disability Action Plan amended accordingly.

### 3.0 Next Steps

The Trusts considered all the written responses and feedback provided throughout the consultation process in full. The Section 75 Action Based Plans and Disability Action Plans have been amended in accordance with the feedback received.

Trusts are committed to on-going engagement with stakeholders and their representatives during the implementation and review of the Plans

This Report will be submitted with the amended Section 75 Action Based Plan and the Disability Action Plan to the Equality Commission for Northern Ireland and formally approved by Trust Board.

## Appendix 1

### **EQUALITY IN ACTION - CONSULTATION EVENT 26 MARCH 2014**

10.00	Tea, Coffee and Registration
10.30	Welcome and Introduction Pamela Montgomery Non-Executive Director, NHSC
10.40	Equality Commission Northern Ireland Priorities Patrice Hardy, ECNI
11.00	DVD 'Section 75 – Your Stories' Aoife Trueman and Alison Irwin, NHSC
11.15	Inequalities Action Based Plan 2014- 2017 Orla Barron, BHSC Lynda Gordon, SHSC
11.25	The View from the Disability Sector Patricia Bray, Disability Action
11.35	Disability Action Plan 2014- 2017 Alison Irwin, NHSC Siobhan O'Donnell, WHSC
11.45	NIAS Equality Review Michelle Lemon, NIAS
11.50	Graffiti/Consultation Wall Susan Thompson, SEHSC
12.05	Closing Remarks Pamela Montgomery
12.15	Light Lunch

**EQUALITY IN ACTION****26 March 2014****Attendance List**

Name	Title	Organisation
Isobel H Allison	Director – HR and Training	Extra Care
Judith Cross	Strategic Policy Advisor	Age NI
Colin Flinn	Advisor	Age NI Shopmobility Carafriend
Anne Graham	Assistant Regional Manager	Stroke Association DNA
Natalie McConnell	Childcare Solutions Co-ordinator	Employers for Childcare Charitable Group
Alice Johnston	Community Advocacy Officer	British Deaf Association NI
Claire Lavery	Communications and Campaigns Manager	Action on Hearing Loss
Lisa McAuley	Social Network Facilitator	The Cedar Foundation
John McCormick	Campaigns and Communication Officer	Carers NI
Matthew McDermott	Policy and Advocacy Manager	The Rainbow Project
Dympna McGlade	Policy Director	Community Relations Council
John McKee	Chairman	Northern Trust Mental Health and Well-being Forum
Paul McKenna	Service User	The Cedar Foundation
Patricia Nicholl	Chief Executive Officer	NI Guardian Ad Litem Agency
Emma Patterson-Bennett	Equality Coordinator	Committee on the Administration of Justice
Emma Patterson	User Board Member	Compass
Anita Sores	User Board Member	Compass

Nicola Gault	User Board Member	Compass Advocacy Group
Jenny Ruddy	Campaigns Officer	Mencap in NI
Ursula Campbell	User Board Member	Compass
Tori Tennant	User Forum	NHSCT
Anne Straghan	Representative	Cedar Foundation
Robert Gillespie	Representative	Cedar Foundation
Lyn Campbell	Representative	Carers NI
Fred Cowan	Service User	NHSCT
Brenda Hodgkinson	Equality Officer	ECNI
Kevin Oakes	Equality Officer	ECNI
Pamela Montgomery	Non-Executive Director	NHSCT
Patrice Hardy	Equality Manager	ECNI
Aoife Trueman	Equality Unit	NHSCT
Alison Irwin	Equality Manager	NHSCT
Orla Barron	Health and Social Inequalities Manager	BHSCT
Louise Neeson	Equality Manager	BHSCT
Lynda Gordon	Head of Equality	SHSCT
Patricia Bray	Statutory Duty and Policy Officer	Disability Action
Siobhan O'Donnell	Head of Service Equality and Involvement Office	WHsCT
Michelle Lemon	Assistant Director Equality, PPI	NIAS
Christine Wilkinson	Assistant Director Human Resources	NIAS
Michelle Lennon	Equality Manager	SHSCT
Susan Thompson	Equality Manager	SEHSCT
Trisha McMaster	Sign Language Interpreter	
Catherine Scullion	Sign Language Interpreter	
John McPoland	Paramedic	NIAS

## Feedback from the Graffiti Wall

### Questions and Answers;

- Provide time for questions and discussions regarding the speaker's presentations.
- Set up workshops to share views on the consultation.
- Too many speakers.

Comments welcomed and noted and will be taken into consideration for future events.

### Accessible;

- Would be good to see resources made accessible for deaf people, for e.g. DVD would be good if it included subtitles.
- Have a group of disabled people work on Trust resources to ensure they are accessible.
- Accessible information is not just about 'easy-read'. Needs to be subtitled/signed.
- Trust websites should be translated into BSC/ISC of deaf key information.
- Trust complaints process needs to be delivered in BSC/ISC also.

Comments welcomed and noted. A sign language DVD on 'How to Make a Complaint' has been produced and is available on Trust websites. Consideration will be given for sign language on future resources.

### Consultation;

- No sense that consultation responses are acted upon or taken account of.
- Support what Patricia Bray said about pre-consultation supporting Trust's to get plans/policies right before they go to full consultation.

Comments welcomed and noted especially support for pre-consultation event prior to 12 week formal consultation. Responses to comments included in Section 2.

### Action Based Plan;

- Would like to see action points to identify and support LGBT carers, both as service users and staff members.
- Carers aren't directly discriminated against in terms of access to health and social care. However, their caring responsibilities affect their ability to access

the treatments they need. We need clear action points in the plan to address this.

- Action based plan needs to take account of ageism and age attitudes – Dignity, Francis Reports.
- Would like an action point on Unmet Need. Recording of Unmet Need and identifying any trends among Section 75.
- Older people are restricted access to care, lack of treatment for cancer based on age and your action-based plan. (Age NI)
- Need to take account of Ageing Strategy also.
- Older people are the greater service users of HSC, yet it's as if their needs are ignored.
- Programme of care especially POC4 limit and influence the type of care that older people get. How does the Action Based Plan impact on them?
- Mental health patient turned 65, Action Based Plan must recognise them and maybe influence these POC'S.
- Review of Age Discrimination across HSC needed.
- How do you know Age Discrimination has taken place without a robust analysis of Discrimination? Age NI
- Audit of Inequalities needs to be based on functions of the Trust- Age NI response March 2011.
- Mixed sex wards still exist.
- Need to take account of Dignity Commission as well as the Francis Report.
- Low level prevention measures are cost effective and are what older people want, yet only a focus on reablement.
- How do you justify the different rates of care paid to older people, usually lower levels?
- Issue around paying for communication support for people in volunteering or work placements- who pays?
- Great that the Trusts have flexible working arrangements for current staff, but do advertised jobs with fixed hours deter applicants with caring or childcare responsibilities?