Public Authority Statutory Equality and Good Relations Duties
Annual Progress Report 2015-16

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Documents published relating to our Equality Scheme can be found at:
http://www.hscbusiness.hscni.net/services/1788.htm and
http://www.hscbusiness.hscni.net/about/CorporateInformation.htm

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Signature:

This report has been prepared using a template circulated by the Equality Commission. It presents our progress in fulfilling our statutory equality and good relations duties, and implementing Equality Scheme commitments and Disability Action Plans. This report reflects progress made between April 2015 and March 2016.
PART A

Appendix 1: Equality Action Plan Progress Report 2015-16
Appendix 2: Screening Report 2015-16
Appendix 3: Mitigation Report 2015-16
Appendix 5: Disability Action Plan Progress Report 2015-16
### Table 1:

<table>
<thead>
<tr>
<th>Persons of different religious belief</th>
<th><strong>Outline new developments or changes in policies, practices, service planning or delivery and the difference they have made.</strong></th>
</tr>
</thead>
</table>
| Persons of different political opinion | **Shared Services – Regional Interpreting Service**  
- Expanded language services to meet the needs of an increasingly racially diverse local population, introducing provision for new languages such as Arabic, Somali and Urdu.  
- Communication plan to HSC frontline staff implemented to promote the service and ensure full utilisation of service. This has seen an increased uptake of the service resulting in greater access to HSC services for more minority ethnic people living in Northern Ireland. |
| Persons of different racial groups   | **Human Resources**  
- Physical activity support (corporate gym membership, cycle to work, health fairs) – while all age groups will benefit as such, older people may experience positive impacts in particular as to the opportunity to retain their health and wellbeing |
| Persons of different age             | **** |

**Human Resources**

- Physical activity support (corporate gym membership, cycle to work, health fairs) – while all age groups will benefit as such, older people may experience positive impacts in particular as to the opportunity to retain their health and wellbeing.
### Pensions Service

- We developed a communication strategy to include pension scheme presentations at inductions and also presentations/workshops on the changes to pension scheme to all ages of employees rather than only pre-retirement sessions to older staff members so that staff are more informed from earlier in working life as to their pension choices.

### Procurement and Logistics Service

- We engaged the BSO Clinical Education Centre to deliver bespoke training to staff in the Community Equipment and Continence Service on telephone communication with customers who may have communication difficulties due to ill-health related to age.

### Clinical Education Centre (CEC)

- A self-assessment of the CEC Website was carried out to explore accessibility. The website was deemed largely accessible for older people generally. A small number of issues were identified for improvements which will be scheduled into the 2016-17 work programme.

### Legal Services

- The Directorate of Legal Services routinely carries out training throughout the year for social services practitioners, with a particular emphasis on the human rights of service users. Training has been provided to social workers working in family and child care and working with vulnerable adults; such training has focused on Article 8 Rights (right to family and private life). The training has also focused on deprivation of liberty.
safeguards, following the Cheshire West Judgment of the Supreme Court in March 2014.

<table>
<thead>
<tr>
<th>Persons with different marital status</th>
<th>Human Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Mental Health First Aid, Personal Resilience and Mindful Manager courses for all staff – particular benefits for staff who may experience stress as a result of life events such as bereavement, separation, or divorce.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Pensions Service</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Review of scheme forms to modernise language to reflect partnership status rather than only marital status.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Persons of different sexual orientation</th>
<th>Pensions Service</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Review of scheme forms to modernise language to reflect partnership status rather than only marital status.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Men and women generally</th>
<th>Shared Services – Regional Interpreting Service</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Focused on ensuring religious and cultural norms are maintained by increasing our pool of female interpreters to satisfy our service users expectations from minority ethnic communities.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clinical Education Centre</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Recent personnel specifications have been amended for applicants to reflect 3 years in the last 6 years’ experience, to make our jobs more accessible to people who have taken career breaks, mostly women, for</td>
</tr>
<tr>
<td>Persons with and without a disability</td>
<td>Human Resources</td>
</tr>
<tr>
<td>--------------------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td></td>
<td>Physical activity support, Mental Health First Aid, Personal Resilience and Mindful Manager courses for all staff – particular benefits for staff who experience some forms of mental ill health</td>
</tr>
</tbody>
</table>

**Information Technology Services**

- The NI Electronic Care Record (NIECR) team completed discussions with Bamford Group for Mental Health and Learning Disability as well as a representative Patient and Client Council group. This informed the decision to bring selected, mental health information into NIECR with appropriate safeguards implemented via the NIECR Role Based Access and Control model.

**Office of Research Ethics Northern Ireland**

- A members portal was introduced which made materials and papers for meetings more readily available. The portal is compatible with assistive technologies and tablet devices so any current or future committee members with sensory disabilities will have enhanced access.

**Procurement and Logistics Service**

- We engaged the BSO Clinical Education Centre to deliver bespoke training to staff in the Community Equipment and Continence Service on telephone communication with customers who may have communication difficulties.
due to disabilities.

Clinical Education Centre

- The colour of the large T.V. screen in CEC HQ reception, which is a key source of information for visitors, has been changed to black on yellow – to facilitate those with a visual impairment.
- CEC HQ has been fitted with a loop system for people who are hard of hearing.
- The narrative on the CEC website has been amended to help clearly identify participants with disabilities, in order to make reasonable adjustments and make our courses as accessible as possible.
- A self-assessment of the CEC Website was carried out to explore accessibility. The website was deemed largely accessible for disabled people generally. A small number of issues were identified for improvements which will be scheduled into the 2016-17 work programme.
- Training programmes that involve service users with reduced mobility have been moved to the ground floor training room, rather than the standard second floor training room.

Legal Services

- Training has been provided to Approved Social Workers on a regular basis throughout the year, focusing on the requirements of the Mental Health (Northern Ireland) Order 1986 and human rights considerations, in particular Article 5 and Article 8, and the significance of deprivation of
<table>
<thead>
<tr>
<th>Persons with and without dependants</th>
<th><strong>Human Resources</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Mental Health First Aid, Personal Resilience and Mindful Manager courses for all staff – particular benefits for staff who may experience stress as a result of caring responsibilities for young and old dependants</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Pensions Service</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• HSC Pension Service has authorised flexible working patterns to a member of staff due to family dependencies and has also authorised work life balance requests so that staff are now more satisfied in work.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Clinical Education Centre</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Programmes have been delivered in evenings and weekends to facilitate the attendance of people with caring responsibilities.</td>
</tr>
</tbody>
</table>
The BSO Directorate of Legal Services and the BSO Procurement and Logistics Service worked together to deliver a workshop on Social Care Procurement to HSC staff. This involved the equality and disability duties, specific requirements in the Public Contracts Regulations, Human Rights and the Personal and Public Involvement duty.

**Equality Monitoring**

During the year, the Equality Unit, on behalf of the BSO and our partners, coordinated a six week staff monitoring initiative which targeted messages at staff through direct email, screen pop ups and posters, to encourage them to fill out their staff data on our Human Resources Pay, Travel and Subsistance (HRPTS) system. This produced some marginal increases across some of the Section 75 categories however we acknowledge that we have some more work to do to improve the data.

Over and above the particular initiative, prompts to staff on completing equality information on the new Human Resources system were issued at several times during the year.

**Good Relations Statement**

Following engagement with Trade Union Colleagues we agreed and launched a Good Relations Statement, in partnership with the 10 other regional Health and Social Care (HSC) Organisaitons. The statement was launched in the Islamic Centre, Belfast with input by the Community Relations Council.

We will work with our partners in 2016-17 to develop some actions that put meaning to our new statement.

**Gender Identity Employment Policy**

Together with our colleagues from the HSC Trusts we jointly progressed the development of a gender identity employment policy. To this end, equality and human resources staff engaged with groups and individuals from the gender identity sector as well as the LGB& T staff forum in Health and Social Care. Likewise, staff from the regional gender identity service fed into the process.

**Bulletins, newsletter, senior briefings, intranet and email**

We provided our staff with information in the form of emails, features on our intranet, Business Matters (the BSO staff newsletters) and bulletin. These focused on the following:

- Disability Champion in the BSO
• Awareness of Disability Staff Network and Staff Survey
• Training Dates
• Disability Work Placements
• Hearing Loss Awareness Day information and feature
• Learning Disability Awareness Day information and feature
• Staff Equality Monitoring
• Launch and Promotion of Disability Staff Forum.

In addition, a number of senior briefings were provided on the following areas:

• Draft Annual Progress Report
• Training Plan 2015-16
• Disability Placements - Request for placement offers
• Five Year Review of Equality Scheme
• OFMDFM age legislation proposals
• Website Accessibility
• Staff monitoring
• Standards and Guidance for the Involvement of Disabled People in our work
• Good Relations Statement and its launch as well as
• regular updates on the Disability Staff Forum, Awareness Days and Disability Placements.

Website Accessibility

We gave consideration to a number of ways of assessing and improving accessibility of our website, including self-assessment, automated testing tools, website accessibility evaluation services and user-based accessibility testing. This information was disseminated in BSO Directorates with a view to being discussed and actioned at local level. The BSO Equality and Human Rights Forum will review progress against this.

At a Corporate Level self assessment is being considered in discussions around the development of a new BSO Corporate Website.

Standards and Guidance for the Involvement of Disabled People

There are many reasons why it is important to consult and involve service users, carers and the wider community.

People with disabilities tend to be excluded from public services and when health and social care outcomes are agreed with communities, needs are better met and people can be supported to manage their own care. There is a growing body of literature to show that good
quality involvement can lead to improved health and social care outcomes, better value for money and improved quality of life for service users, their families and carers, community and the whole of Health and Social Care.

We therefore, in partnership with our HSC regional colleagues, developed standards and guidance for the involvement of disabled people in our work. We also developed a checklist for staff to ensure that people with a disability can be fully involved when we are arranging meetings and running events.

This was developed in consultation with disabled people and organisations representing disabled people such as; ARC NI, Autism NI, British Deaf Association NI, Omnibus Partnership, Patients Group of Royal College of GPs, Positive Futures, Southern HSC Trust, Telling it like it is group.

Disability Staff Forum

We finalised the establishment of a HSC Disability Staff Forum for staff members in our organisation. This Forum is open to staff working in all 11 HSC Regional Organisations who have an interest in Disability. The Forum is being sponsored in 2016-17 by the Health and Social Care Board.

We worked with HSC colleagues to develop and agree a workable and effective structure for the Forum.

The Forum was launched at the end of 2015-16 and will begin formal meetings, draft terms of reference and establish and promote itself throughout 2016-17.

We will work with partners during 2016-17 to determine the long term sponsorship of the Forum.

Disability Work Placements

Eight individuals began their 26-week work placement with us. The scheme is run jointly with the other regional HSC organisations. Overall, 25 opportunities were created in 2015-16. By the end of March, 15 individuals were participating in the scheme. We designed and delivered bespoke training on How to Get that Job to those on placements.

Disability Awareness Days

Featuring two staff awareness days on disabilities during the year was also one of our objectives. In September, we focused on Hearing Loss. In February, we drew the attention to Learning Disabilities.
On both days, we offered our staff the opportunity to attend a talk by Action on Hearing Loss and Mencap in a number of our office locations. In addition, we provided staff with information materials and signposting information on how to access further support.
2 Please provide examples of outcomes and/or the impact of equality action plans/measures in 2015-16 (or append the plan with progress/examples identified).

Please see Appendix 1: Equality Action Plan Progress Report 2015-16
3. Has the application of the Equality Scheme commitments resulted in any changes to policy, practice, procedures and/or service delivery areas during the 2015-16 reporting period? (tick one box only)

- [ ] Yes
- [ ] No (go to Q.4)
- [ ] Not applicable (go to Q.4)

Please provide any details and examples:

Please see Table 1 under Question 1 for further information. Please also see Appendix 2 and 3: Screening Report 2015-16 and Mitigation

3a. With regard to the change(s) made to policies, practices or procedures and/or service delivery areas, what difference was made, or will be made, for individuals, i.e. the impact on those according to Section 75 category?

Please provide any details and examples:

Please see Table 1 under Question 1 for further information. Please also see Appendix 2 and 3: Screening Report 2015-16 and Mitigation

3b. What aspect of the Equality Scheme prompted or led to the change(s)? (tick all that apply)

- [ ] As a result of the organisation’s screening of a policy (please give details):

  Please see Table 1 under Question 1 for further information. Please also see Appendix 2 and 3: Screening Report 2015-16 and Mitigation.

- [ ] As a result of what was identified through the EQIA and consultation exercise (please give details):

- [ ] As a result of analysis from monitoring the impact (please give details):

- [ ] As a result of changes to access to information and services (please specify and give details):

- [ ] Other (please specify and give details):
Section 2: Progress on Equality Scheme commitments and action plans/measures

Arrangements for assessing compliance (Model Equality Scheme Chapter 2)

4 Were the Section 75 statutory duties integrated within job descriptions during the 2015-16 reporting period? (tick one box only)

☑ Yes, organisation wide
☑ Yes, some departments/jobs
☐ No, this is not an Equality Scheme commitment
☐ No, this is scheduled for later in the Equality Scheme, or has already been done
☐ Not applicable

Please provide any details and examples:
Job descriptions contain the following wording:

“Assist the employing organisation in the fulfilment of its statutory duty under Section 75 of the Northern Ireland Act 1998, to promote equality of opportunity and good relations, and also the Human Rights Act 1998 and the Disability Discrimination Order 2007”.

5 Were the Section 75 statutory duties integrated within performance plans during the 2015-16 reporting period? (tick one box only)

☐ Yes, organisation wide
☐ Yes, some departments/jobs
☐ No, this is not an Equality Scheme commitment
☐ No, this is scheduled for later in the Equality Scheme, or has already been done
☑ Not applicable

Please provide any details and examples:
The BSO includes reference in its job descriptions as follows.

“To assist the Business Services Organisation in the fulfilment of its statutory duty under Section 75 of the Northern Ireland Act 1998, to promote equality of opportunity and good relations, and also the

6 In the 2015-16 reporting period were objectives/ targets/ performance measures relating to the Section 75 statutory duties integrated into corporate plans, strategic planning and/or operational business plans? (tick all that apply)

☐ Yes, through the work to prepare or develop the new corporate plan
☐ Yes, through organisation wide annual business planning
☒ Yes, in some departments/jobs
☐ No, these are already mainstreamed through the organisation’s ongoing corporate plan
☐ No, the organisation’s planning cycle does not coincide with this 2015-16 report
☐ Not applicable

Please provide any details and examples:
“Deliver a full range of health promoting activities and support for staff such as Annual Health Fairs”
“Improve accessibility to HSC Leadership Centre courses via technology”

Equality action plans/measures

7 Within the 2015-16 reporting period, please indicate the number of:

Actions completed: 4
Actions ongoing: 4
Actions to commence: 0

Please provide any details and examples (in addition to question 2):

Please see Appendix 1: Equality Action Plan Progress Report 2015-16

8 Please give details of changes or amendments made to the equality action plan/measures during the 2015-16 reporting period (points not identified in an appended plan):

There were no changes to the Equality Action Plan during the 2015-16 reporting period.
In reviewing progress on the equality action plan/action measures during the 2015-16 reporting period, the following have been identified: *(tick all that apply)*

- Continuing action(s), to progress the next stage addressing the known inequality
- Action(s) to address the known inequality in a different way
- Action(s) to address newly identified inequalities/recently prioritised inequalities
- Measures to address a prioritised inequality have been completed

**Arrangements for consulting (Model Equality Scheme Chapter 3)**

Following the initial notification of consultations, a targeted approach was taken – and consultation with those for whom the issue was of particular relevance: *(tick one box only)*

- All the time
- Sometimes
- Never

The BSO did not undertake any formal public consultation during 2015-16. Where relevant we tend to engage with targeted groups as part of our work preceding formal consultation. This is to inform our consultation documents.

Please provide any **details and examples of good practice** in consultation during the 2015-16 reporting period, on matters relevant (e.g. the development of a policy that has been screened in) to the need to promote equality of opportunity and/or the desirability of promoting good relations:

Please see Table 2 below. Please note that the examples refer to engagement during the development of the policy. Public formal consultation was not undertaken on these.
<table>
<thead>
<tr>
<th>Service Area</th>
<th>Policy consulted on</th>
<th>What equality document did you issue alongside the policy consultation document? (screening template/EQIA report/none)</th>
<th>What consultation methods did you use?</th>
<th>Which of the methods you used drew the greatest number of responses from consultees? (NB: if the consultation started in 2015-16 but is still on-going, please give an interim indication of methods most used and outline the closing date)</th>
<th>If consultees raised concerns, did you review your initial screening decision?</th>
<th>Do you have any comments on your experience of this consultation?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Resources</td>
<td>Health and Well Being</td>
<td>None</td>
<td>Email</td>
<td>Face-to-face (OWD group)</td>
<td>N/A</td>
<td>Maybe worth considering consulting with</td>
</tr>
<tr>
<td>Strategy</td>
<td>(with Trade Unions. Consultation with the BSO’s OWD group).</td>
<td></td>
<td>mental health voluntary orgs at an early stage.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
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<td>---</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Human Resources</td>
<td>Support for staff training, education and development policy and procedure (SSTEAD)</td>
<td>None</td>
<td>Trade Unions</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Human Resources</td>
<td>Secondment Guidance for Line Managers and Employees</td>
<td>None</td>
<td>Trade Unions</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>
12  In the 2015-16 reporting period, given the consultation methods offered, which consultation methods were **most frequently used by consultees**: *(tick all that apply)*

- ☒ Face to face meetings
- ☐ Focus groups
- ☒ Written documents with the opportunity to comment in writing
- ☐ Questionnaires
- ☒ Information/notification by email with an opportunity to opt in/out of the consultation
- ☐ Internet discussions
- ☐ Telephone consultations
- ☐ Other *(please specify)*:

Please provide any details or examples of the uptake of these methods of consultation in relation to the consultees’ membership of particular Section 75 categories:

Please see Table 2 under Question 11 above. Please note none of these were formal public consultations but rather engagement exercises.

13  Were any awareness-raising activities for consultees undertaken, on the commitments in the Equality Scheme, during the 2015-16 reporting period? *(tick one box only)*

- ☒ Yes  ☐ No  ☐ Not applicable

Please provide any details and examples:

In our quarterly screening reports we raise awareness as to our commitments relating to equality screenings and their publication.

14  Was the consultation list reviewed during the 2015-16 reporting period? *(tick one box only)*

- ☒ Yes  ☐ No  ☐ Not applicable – no commitment to review
Arrangements for assessing and consulting on the likely impact of policies (Model Equality Scheme Chapter 4)

All BSO equality and human rights screenings can be viewed on our website: [http://www.hscbusiness.hscni.net/services/2644.htm](http://www.hscbusiness.hscni.net/services/2644.htm)

15 Please provide the **number** of policies screened during the year *(as recorded in screening reports)*:

12

16 Please provide the **number of assessments** that were consulted upon during 2015-16:

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Policy consultations conducted with <strong>screening</strong> assessment presented.</td>
</tr>
<tr>
<td>0</td>
<td>Policy consultations conducted with <strong>an equality impact assessment</strong> (EQIA) presented.</td>
</tr>
<tr>
<td>0</td>
<td>Consultations for an <strong>EQIA</strong> alone.</td>
</tr>
</tbody>
</table>

12 policies and their equality screening templates were included in our screening reports.

17 Please provide details of the **main consultations** conducted on an assessment *(as described above)* or other matters relevant to the Section 75 duties:

The BSO did not conduct any consultations on assessments.

18 Were any screening decisions *(or equivalent initial assessments of relevance)* reviewed following concerns raised by consultees? *(tick one box only)*

- [ ] Yes
- [x] No
- [ ] No concerns were raised
- [ ] Not applicable

Please provide any details and examples: Not applicable
Arrangements for publishing the results of assessments (Model Equality Scheme Chapter 4)

19 Following decisions on a policy, were the results of any EQIAs published during the 2015-16 reporting period? *(tick one box only)*

- [ ] Yes
- [ ] No
- [x] Not applicable

Please provide any details and examples:

Arrangements for monitoring and publishing the results of monitoring (Model Equality Scheme Chapter 4)

20 From the Equality Scheme monitoring arrangements, was there an audit of existing information systems during the 2015-16 reporting period? *(tick one box only)*

- [ ] Yes
- [x] No, already taken place
- [ ] No, scheduled to take place at a later date
- [ ] Not applicable

Please provide any details:
Please see last year’s Annual Progress Report.

21 In analysing monitoring information gathered, was any action taken to change/review any policies? *(tick one box only)*

- [x] Yes
- [ ] No
- [ ] Not applicable

Please provide any details and examples:
Please see Table 3 below.
### Table 3

<table>
<thead>
<tr>
<th>Service or Policy</th>
<th>What equality monitoring information did you analyse?</th>
<th>Did the way you used the data result in improved access to information or services?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health and Well Being strategy</strong></td>
<td>Sickness absence information, particularly absences relating to mental health. We monitored the breakdown of staff by grade, by gender and by age group. This information was provided to the BSO’s SMT and its Board for information. Monitoring of this has and will continue to be an on-going process. The BSO’s aim is to improve upon better access to H&amp;WB services for staff and more communication on H&amp;WB issues to staff.</td>
<td>Business case was developed for additional funds in 2014/15 to implement H&amp;WB courses for all staff. Mental Health Awareness courses rolled out and still on-going.</td>
</tr>
<tr>
<td><strong>NHS E- Screening</strong></td>
<td>Results from Access to Health and Social Care proactive exercises</td>
<td></td>
</tr>
<tr>
<td><strong>(Counter Fraud and Probity)</strong></td>
<td>Census data 2011</td>
<td></td>
</tr>
</tbody>
</table>
22 Please provide any details or examples of where the monitoring of policies, during the 2015-16 reporting period, has shown changes to differential/adverse impacts previously assessed:

No monitoring was undertaken of policies previously assessed.
23 Please provide any details or examples of monitoring that has contributed to the availability of equality and good relations information/data for service delivery planning or policy development:

Please see Table 3 under Question 21 above.

Staff Training (Model Equality Scheme Chapter 5)

24 Please report on the activities from the training plan/programme (section 5.4 of the Model Equality Scheme) undertaken during 2015-16, and the extent to which they met the training objectives in the Equality Scheme.

In total, 236 members of staff participated in training and awareness sessions.

<table>
<thead>
<tr>
<th>Training Type</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>EQIA</td>
<td>3</td>
</tr>
<tr>
<td>Screening training</td>
<td>33</td>
</tr>
<tr>
<td>Corporate induction</td>
<td>183</td>
</tr>
<tr>
<td>Equality &amp; diversity workshop</td>
<td>15</td>
</tr>
<tr>
<td>Placement training</td>
<td>2</td>
</tr>
</tbody>
</table>

eLearning: Discovering Diversity Training Figures

<table>
<thead>
<tr>
<th>Module Type</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Module 1 to 4 – Diversity</td>
<td>25</td>
</tr>
<tr>
<td>Module 5 – Disability</td>
<td>21</td>
</tr>
<tr>
<td>Module 6 – Cultural Competencies</td>
<td>21</td>
</tr>
</tbody>
</table>

25 Please provide any examples of relevant training shown to have worked well, in that participants have achieved the necessary skills and knowledge to achieve the stated objectives:

The Business Services Organisation avails of the joint Section 75 training programme that is coordinated and delivered by the Equality Unit for staff across all 11 partner organisations. The following statistics thus relate to the evaluations undertaken by all participants for the Equality Screening Training and Equality Impact Assessment Training respectively.

Equality Screening Training
[The figures in bold represent the percentage of participants who selected ‘Very Well’ or ‘Well’ when asked the questions below.] Participants were asked: “Overall how well do you think the course met its aims”:

- To develop an understanding of the statutory requirements for screening: 99.0%
- To develop an understanding of the benefits of screening: 99.0%
- To develop an understanding of the screening process: 97.0%
- To develop skills in practically carrying out screening: 97.0%

[The figure in bold represents the percentage of participants who selected ‘Extremely Valuable’ or ‘Valuable’ when asked the question below.] Participants were asked: “How valuable was the course to you personally? 97.0%

**Equality Impact Assessment Training**

Participants were asked: “Overall how well do you think you have achieved the following learning outcomes:

- To demonstrate an understanding of what the law says on EQIAs 83.0%
- To demonstrate an understanding of the EQIA process 83.0%
- To demonstrate an understanding of the benefits of EQIAs 78.0%

To develop skills in practically carrying out EQIAs 72.0%

**Public Access to Information and Services (Model Equality Scheme Chapter 6)**

26 Please list any examples of where monitoring during 2015-16, across all functions, has resulted in action and improvement in relation to access to information and services:

The BSO did not undertake any monitoring that led to such action and improvement.

**Complaints (Model Equality Scheme Chapter 8)**

27 How many complaints in relation to the Equality Scheme have been received during 2015-16?

Insert number here: 0
Section 3: Looking Forward

Please indicate when the Equality Scheme is due for review:

The Equality Scheme was reviewed and the report submitted to the Equality Commission at the end of March 2016.

The review generally found that the scheme has proved a reasonably workable basis for mainstreaming equality and good relations in decision-making from the point of view that it covers essential elements of mainstreaming.

The mainstreaming of screening has been progressing across the organisation with, for the most part, service and policy outcomes benefiting from the process. However at times, for example with technical policies, minor policies, or regional policies that have no scope for change, the screening process can seem overly procedural and not contribute to better outcomes, impacting on staff buying into the process and its ability to advance equality of opportunity generally, as a result.

Successful elements include, for example, the training commitments. They underline the importance of carrying out sessions to develop specialist knowledge and skills of staff in actively promoting equality in particular. In practice, the refinement of skills in undertaking equality screenings and equality impact assessments largely takes place on the job.

It seems reasonable to conclude that the good relations part of Section 75 has played a less prominent role than the promotion of equality of opportunity. The BSO would argue that progress in this respect has been contingent less so on the equality scheme itself than on a fundamental caution to move away from the concept of a neutral work environment, given conflicting statutory requirements and the resulting risk of being in breach of these.

The BSO’s experience has shown that a partnership approach together with other HSC organisations supported by a specialist unit allows the pooling of resources, creates economies of scale, enables the delivery of a rolling programme of training and the development of relationships with voluntary sector organisations. Most importantly, it facilitates shared learning and consistency where possible.

This partnership approach has also been beneficial to our organisation through easier and more efficient facilitation of regional work across HSC in Northern Ireland, including the 11 partnership organisations and the 6 Health and Social Care Trusts.
29. Are there areas of the Equality Scheme arrangements (screening/consultation/training) your organisation anticipates will be focused upon in the next reporting period? *(please provide details)*

- undertaking equality screenings across all BSO service areas and ensuring that screening templates are forwarded to the Equality Unit for publication (to comply with statutory requirements under Section 75)
- issuing equality screening documents alongside policy documents in any policy consultations and engagement
- where relevant undertaking EQIAs
- undertaking monitoring, including on policies screened.

30. In relation to the advice and services that the Commission offers, what *equality and good relations priorities* are anticipated over the next (2016-17) reporting period? *(please tick any that apply)*

- [x] Employment
- [x] Goods, facilities and services
- [ ] Legislative changes
- [x] Organisational changes/ new functions
- [ ] Nothing specific, more of the same
- [ ] Other (please state):
PART B - Section 49A of the Disability Discrimination Act 1995 (as amended) and Disability Action Plans

When we produced our Disability Action Plan we decided that it is important to do so in a language and format that is easy to understand. A copy of our Plan for 2013-2018 is available on our website.

In the same way, we want to make sure that people can easily follow what we do from year to year as we carry out our plan. We have produced a report for 2015-16. It is attached as Appendix 5. This report contains the information required for the statutory reporting in what we hope is an accessible language and format.
## Appendix 1: BSO Equality Action Plan - Progress Reporting against Implementation Plan 2015-16

<table>
<thead>
<tr>
<th>Lead Responsibility</th>
<th>Action Points</th>
<th>Progress April 2015 -Mar 2016 and Comments</th>
<th>Outcomes for Section 75 groups</th>
</tr>
</thead>
</table>
| Human Resources     | **Theme 1: Action Measure 1**  
Objective: To agree an approach to the provision of accessible formats for BSO  
- BSO will agree an approach for provision of information in alternative formats and identify any gaps (Sept 2015)  
- Raise awareness of policy amongst service users and staff (Mar 2016)  
- Take lead responsibility for engaging with partner organisations to maximise collaboration in implementing the policy (Mar 2016)  
- Develop business cases and costing for prioritised areas if required (Mar 2016)  
Still in progress. Expected timescale for completion is September 2016. | Ultimately the intent is improved accessible information for all equality categories but with particular emphasis on age, various aspects of disability, ethnic minorities and sexual orientation. |
<table>
<thead>
<tr>
<th><strong>Cancer Screening Call/Recall Manager</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Theme 1: Action Measure 2</strong></td>
</tr>
<tr>
<td><strong>Objective:</strong></td>
</tr>
<tr>
<td>Family Practitioner Services: Call/Recall Services for Bowel Cancer Screening – Improved access to helpline</td>
</tr>
<tr>
<td>• Explore the potential for the use of a range of communication methods to improve accessibility for those with sensory impairments including SMS text message facility and Text Relay (Mar 2014)</td>
</tr>
<tr>
<td>• Advertise all options for accessing advice and support services including number of text relay, SMS text messaging (in all Next Generation Text (NGT) Service is now in place for patients who have hearing impairments from March 2016.</td>
</tr>
<tr>
<td>NGT information will be included in the next print-run of leaflets.</td>
</tr>
<tr>
<td>Correspondence and availability of telephone interpreting services (Mar 2014)</td>
</tr>
<tr>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>- Engage with the Screening Programme Manager in the Public Health Agency to ensure that any information on screening for bowel cancer (and cervical cancer) includes accessibility details as per the options noted above (Mar 2014)</td>
</tr>
<tr>
<td>- Sign off changes in relation to accessibility to screening letter (Mar 2014)</td>
</tr>
<tr>
<td>- Discuss with RNIB to improve communication and raise awareness of Bowel Cancer Screening programme for those with visual impairment (Mar 2014)</td>
</tr>
<tr>
<td>NGT information will be included in the next print-run of leaflets.</td>
</tr>
<tr>
<td>Unable to add any additional information to screening letter because of lack space issues. The information will be contained in the leaflets that are included with the letter.</td>
</tr>
<tr>
<td>A new process has been developed using a different type of test for visually impaired which, however, still does not suit all visually impaired.</td>
</tr>
<tr>
<td>Chief Legal Adviser</td>
</tr>
<tr>
<td>---------------------</td>
</tr>
<tr>
<td>Objective: Review finance processes within the Directorate of Legal Services relating to payments. This involves the payments of damages and claimants’ costs following settlement of claims to minimise delays.</td>
</tr>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Family Practitioner Services</th>
<th><strong>Theme 3: Action Measure 1</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective: Needs of Section 75 groups are taken into consideration</td>
<td></td>
<td>None</td>
</tr>
<tr>
<td></td>
<td></td>
<td>None</td>
</tr>
<tr>
<td></td>
<td></td>
<td>None</td>
</tr>
</tbody>
</table>
in the planning, design and delivery of BSO Cancer Screening Services (Call/Recall and Helpline)

- Engage with Programme Manager in the Public Health Agency to secure Family Practitioner representation in any future reference group in relation to cancer screening services (Mar 2014)
- Engage with service users and representative groups (Mar 2014)
- Further exploration required with the Health & Care Index team and PHA in relation to gender change protocols for Patient Registration, Cytology and Breast Screening Services (Mar 2014).

| Information Technology Services | **Theme 4: Action Measure 1**  
**Objective:** Information Technology Services: Improved protocols and systems are in place to enhance the sharing of our Data Warehouse and Integration teams continue to work closely with HSC organisation to facilitate the increased scope and development of information sharing. | Screening Services Managers attend meetings as required.  
Currently under review by PHA. | Sharing information improves access to and quality of care for all section 75 groups. |
of relevant patient information across HSC organisations.

- Continue to work with HSC Board, regional HSC organisations and the DHSSPS to progress the development of information sharing arrangements.
- Ensuring that HSC service users etc. are fully aware of scope for information sharing across applications/systems, including training, where appropriate.
- Ensuring that relevant professional groups endorse proposals.
- Ensuring that relevant legislative requirements are adhered to.
- Continue to consult with appropriate decision-makers, representative groups and affected individuals at the technology design stage
- Investigate scope for sharing.

The ‘Beyond Silos’ project is a European project to improve patient outcomes through integration of healthcare information. Our Senior Project Manager and 2 Clinicians are now to delivering on 3 key strands of work:

1. Integration of remote telemonitoring (RTNI)
2. Integration of NISAT
3. Provision of Shared Care Summary

Continue to work on development of KIS – suppliers will develop to put on test server. The Key Information Summary (KIS) - a summary of medical history and patient wishes and aims to improve key information and continuity

These 3 strands provide useful information about medical, key contacts and care plans for over 65s with chronic morbidity to ensure they have equal access to high quality care and treatment. These initiatives help keep people at home rather than be admitted to hospital, for example with COPD. NISAT provides for on-going assessment of elderly patients in hospital and community setting and is aimed at ensuring better communication between care providers involved with this
capturing patient/client disability, ethnicity and other data related needs in Health and Care Number at replacement stage (2013)

of care for patients who have long-term conditions
The ECR project continues to be rolled out with over 12,000 clinical staff regularly using the system. Professional groups are involved in all stages of system development and implementation. We are currently attempting to recruit an additional trainer for Southern Trust area to increase the adoption of ECR. This is currently filled by an agency member of staff.

ITS are also involved in a number of other projects which make a positive contribution towards the drive for equality such as the rollout of the regional interpreting service. Improvements to Child Health Services such as the

KIS is designed to produce outcomes for all service users however by its nature it will benefit those patients with difficulty communicating.

In relation to equality this means that a number of the section 75 groups who may have difficulties in remembering or communicating key issues relating to their medical history will be helped by the accurate provision of this information to their
The development of an electronic interface between the CHS and the education systems (C2K) will remove the need for manual transcription which will hopefully improve the take-up of childhood vaccination and immunisation services.

The Health and Care number replacement project is still at business case development stage but will take into consideration the wider equality requirements in the procurement and implementation phases once approval to proceed is granted.

<table>
<thead>
<tr>
<th>Human Resources</th>
<th><strong>Theme 5: Action Measure 2</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective:</td>
<td>Increased capacity of line managers to identify and respond to the range of Section 75 needs of their staff through access to</td>
</tr>
<tr>
<td>Human Resources (with support from Equality Unit)</td>
<td><strong>Theme 5: Action Measure 3</strong></td>
</tr>
<tr>
<td>-------------------------------------------------</td>
<td>--------------------------------</td>
</tr>
<tr>
<td><strong>Objective:</strong> Human Resources: BSO supports staff who identify as trans* in meeting their particular needs in the workplace linked to their gender identity</td>
<td></td>
</tr>
<tr>
<td>• Liaise with regional Human Resources and equality colleagues to explore scope for HSC-wide policy (Dec 2016)</td>
<td></td>
</tr>
<tr>
<td></td>
<td><em><em>Applicants and staff who identify as trans</em> feel supported by the organisation</em>*</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>guidance materials</th>
<th>enable signposting to relevant voluntary sector organisations to access further information if required. Guidance will be consulted with the Trade Unions and disseminated to all managers for information and appropriate action. Timescale has been moved to September 2016.</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Produce guidance resource for line managers on how best to support staff from different Section 75 groups (June 2015)</td>
<td></td>
</tr>
<tr>
<td>• Engage with managers, relevant voluntary sector groups and trade unions (Sept 2015)</td>
<td></td>
</tr>
<tr>
<td>• Disseminate and raise awareness of resource (Mar 2015).</td>
<td></td>
</tr>
</tbody>
</table>
| Customer Relations and Service Improvement | **Theme 6: Action Measure 1**  
Objective: Customer Relations and Service Improvement: BSO service providers give assurance to customers that their services comply with equality of opportunity and human rights legislation  
- Add clause detailing BSO commitment to equality duties for inclusion in service level agreements (Apr 2013) | The following clause has been added to all service level agreements:  
“The BSO is committed to promoting equality of opportunity and fulfilling its obligations within the meaning and scope of the provisions of the Northern Ireland Act 1998 and the Human Rights Act 1998 in relation to the delivery of services under this |
| Agreement." |
Appendix 2

Equality and Human Rights Screening Report

April 2015 – March 2016
<table>
<thead>
<tr>
<th>Policy / Procedure and Screening Documentation</th>
<th>Policy Aims</th>
<th>Date</th>
<th>*Screening Decision</th>
</tr>
</thead>
<tbody>
<tr>
<td>NIHSC Interpreting Service Training Strategy</td>
<td>This strategy has been developed to support the Interpreting Service in meeting the needs of Patients, Clients and HSC Staff and to improve client satisfaction and service delivery through delivery of high-quality training to its Interpreters.</td>
<td>May-15</td>
<td>2</td>
</tr>
<tr>
<td>Relocation of GP Payment function from Ballymena to Belfast</td>
<td>Co-location with the other FPS payment functions, which are based in Belfast, allows for greater flexibility in the deployment of resources across FPS and provides an opportunity to reduce management costs.</td>
<td>Apr-15</td>
<td>2</td>
</tr>
<tr>
<td>Incident reporting Policy</td>
<td>To establish a policy document of the Business Services Organisation’s responsibility for reporting all incidents/risks to ensure the safety and well-being of staff and to assist in the effective running of daily operations.</td>
<td>Jun-15</td>
<td>2</td>
</tr>
<tr>
<td>Corporate Strategy 2015-18</td>
<td>The Corporate Strategy 2015-18 sets out the strategic context in which the organisation operates, along with Mission, Values and Strategic Objectives for this three year period.</td>
<td>Apr-15</td>
<td>3</td>
</tr>
<tr>
<td><strong>Business Services Organisation (BSO) Service Offering 2015/16</strong></td>
<td>The aim of this document is to articulate the BSO’s service offering for 2015/16. This is underpinned by the DHSSPSNI’s determination that the BSO has to make cash savings for the 2015/16 financial year. This document therefore indicates how each service area will provide these savings e.g. on goods and services and/or pay, income generation or increases in productivity.</td>
<td>Mar-15</td>
<td>3</td>
</tr>
<tr>
<td><strong>Terms of Engagement Interpreting Service</strong></td>
<td>Interpreters on the register provide interpreting services within health and social care on a self-employed sessional basis. The Terms of Engagement ensure that the practicalities of the work as well as the ethics are explicit and provide clarity in relation to good governance and processes for both interpreters and BSO.</td>
<td>Jun-15</td>
<td>2</td>
</tr>
<tr>
<td><strong>BSO Records Policy</strong></td>
<td>The Policy explains how the Business Services Organisation will manage the creation, retention and destruction of all course of business records created and managed by the BSO.</td>
<td>Aug-15</td>
<td>2</td>
</tr>
<tr>
<td><strong>Disability Action Plan 2013 - 18</strong></td>
<td>The purpose of this action plan is to outline some key actions that we are going to deliver upon to make a difference to people with disabilities including staff and people who use our services, and where relevant, their carers. It relates to the disability duties under the Disability Discrimination Order. We have reviewed our plan and updated it accordingly.</td>
<td>Jun-15</td>
<td>2</td>
</tr>
<tr>
<td><strong>Disability Placement Scheme</strong></td>
<td>The 26 week placement opportunities are unpaid, targeted at people with a diverse range of disabilities wishing to gain meaningful work experience. The objective is twofold: to support people with a disability</td>
<td>Feb-15</td>
<td>2</td>
</tr>
<tr>
<td><strong>Expansion of Corporate Services</strong></td>
<td>The objective is to explore the scope for certain functions to be expanded within the BSO in order to improve efficiency and effectiveness, as part of the Permanent Secretary’s on-going review of administrative structures.</td>
<td>Nov-15</td>
<td>2</td>
</tr>
<tr>
<td><strong>BSO Risk Management Strategy including policy statement, BSO Risk Management Guide, Procedure for the Management of Risk Registers, Risk Management Policy</strong></td>
<td>The purpose of the risk management strategy and policy statement is to establish a consistent and integrated approach to the management of risk throughout the BSO.</td>
<td>Feb-16</td>
<td>2</td>
</tr>
<tr>
<td><strong>ORECNI-Portal</strong></td>
<td>The aim of the Portal is to give members access to relevant papers for meetings, allowing them to access the papers in a timely manner. It is also intended to be an alternative to paper.</td>
<td>Sep-15</td>
<td>2</td>
</tr>
</tbody>
</table>
Appendix 3

Equality and Human Rights Mitigation Report

April 2015 – March 2016
## NIHSC Interpreting Service Training Strategy

<table>
<thead>
<tr>
<th>In developing the policy or decision what did you do or change to address the equality issues you identified?</th>
<th>What do you intend to do in future to address the equality issues you identified?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facilities used for training will be assessed for accessibility for physically and sensory impaired colleagues</td>
<td>N/A</td>
</tr>
<tr>
<td>All materials used for training will be provided in accessible formats upon request</td>
<td></td>
</tr>
<tr>
<td>A range of training times will be selected when consideration of training schedules are being undertaken, to ensure those with caring responsibilities are not disadvantaged</td>
<td></td>
</tr>
<tr>
<td>All communications designed to promote the training programme to all stakeholders will be accessible and produced in alternative formats upon request.</td>
<td></td>
</tr>
</tbody>
</table>
# Relocation of GP Payment function from Ballymena to Belfast – April 2015

<table>
<thead>
<tr>
<th>In developing the policy or decision what did you do or change to address the equality issues you identified?</th>
<th>What do you intend to do in future to address the equality issues you identified?</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>To meet needs resulting from disability, any request for a reasonable adjustment in new working environment will be put in place. Consultation with Staff-side is planned and formal discussions with individual members of staff will take place following this consultation. These impacts will form part of the decision making process, assisting in the final decision taken.</td>
</tr>
</tbody>
</table>
### Terms of Engagement Interpreting Service

<table>
<thead>
<tr>
<th>In developing the policy or decision what did you do or change to address the equality issues you identified?</th>
<th>What do you intend to do in future to address the equality issues you identified?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any accessibility issues by way of disseminating the ToE will be considered and arrangements can be explored for the provision of the document in a required accessible format.</td>
<td></td>
</tr>
<tr>
<td>All meetings will be held in accessible buildings.</td>
<td></td>
</tr>
</tbody>
</table>
### BSO Records Policy

<table>
<thead>
<tr>
<th>In developing the policy or decision what did you do or change to address the equality issues you identified?</th>
<th>What do you intend to do in future to address the equality issues you identified?</th>
</tr>
</thead>
<tbody>
<tr>
<td>In line with DDA requirements, reasonable adjustments will be made for disabled staff as required. Requests for alternative formats of any supplementary guidance will be considered.</td>
<td></td>
</tr>
</tbody>
</table>


## Disability Action Plan 2013 - 18

<table>
<thead>
<tr>
<th>In developing the policy or decision what did you do or change to address the equality issues you identified?</th>
<th>What do you intend to do in future to address the equality issues you identified?</th>
</tr>
</thead>
</table>
| In developing the disability action plan staff with disabilities and staff who had caring responsibilities for people with disabilities were actively involved. This entire disability action plan has been developed as positive action, in order to make a difference to staff and service users with a disability. By adopting this action plan we believe that we will be in a position to make tangible differences. In recognising the importance of accessibility the disability action plan includes a specific action for adaption and adoption of an accessible formats policy. Disability Awareness Days  
- Work to feature specific disabilities will take into consideration the need to include a range of age groups, ethnic groups and genders when testimonials and case studies are selected. Information distributed to staff will take on board the needs of | The actions within the plan are time specific with specific outcomes highlighted. In progressing actions cognisance will be taken of the wider section 75 equality categories that are also the key characteristics of people with disabilities. Monitoring of the action plan on an ongoing basis is key as is the involvement of people with disabilities as identified as one of the actions in the plan. The following elements of the plan will be subjected to a stand alone equality screening, and where appropriate, equality impact assessment:  
  - Work Placements  
  - Staff Forum  
  - Disability Awareness Days |
both staff with a particular disability and staff who are carers.

Work Placements
- We will work with a range of disability organisations to ensure opportunities are offered to people from a wide spectrum of disabilities, as well as different gender and age groups.

Staff Forum
- We will ensure that the way the forum operates allows people with a range of disabilities and from a range of age and ethnic backgrounds to be involved (for example, by providing information in accessible formats and choosing accessible venues).
## Disability Placement Scheme

<table>
<thead>
<tr>
<th>In developing the policy or decision what did you do or change to address the equality issues you identified?</th>
<th>What do you intend to do in future to address the equality issues you identified?</th>
</tr>
</thead>
<tbody>
<tr>
<td>The scheme incorporates provisions for identifying and making reasonable adjustments. Supported Employment Solutions are responsible for ensuring their communication and information is accessible for all. A number of placement locations are chosen to encourage access to the scheme for people in a range of areas and from a range of religious and community backgrounds. Identifying and addressing training and awareness needs of staff is also a key component. This should also capture training and awareness needs relating to multiple identities of participants (such as in relation to gender identity and sexual orientation).</td>
<td>Outreach measures by Supported Employment Solutions to target equality groups less likely to sign on with consortium organisations (including transgender people).</td>
</tr>
</tbody>
</table>
**Expansion of Corporate Services**

<table>
<thead>
<tr>
<th>In developing the policy or decision what did you do or change to address the equality issues you identified?</th>
<th>What do you intend to do in future to address the equality issues you identified?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Each individual will have the opportunity to follow their job to BSO. There will be no compulsory moves nor any compulsory redundancies. All staff who transfer to BSO will have their terms and conditions of employment retained and this includes their weekly working hours. No individual will be compelled to increase their hours neither will they unreasonably be refused an offer to increase their hours, subject to needs of the service. All staff who transfer to BSO will have their terms and conditions of employment retained and this includes their salary. Should the individual be moved to a lower banded post, pay protection will apply in accordance with their contract of employment. All affected staff currently work in the Greater Belfast area and if they do move to BSO, will be based within Belfast City Centre, which is served with good public transport networks and will not significantly increase the distance to their work place or associated cost.</td>
<td>Ensure continued protection of terms and conditions for all affected staff Continue to assess all policies and decisions for equality implications. Continue to promote equality and diversity in BSO</td>
</tr>
<tr>
<td>Should any individual transferring to BSO report having a disability, they will be supported by BSO and reasonable adjustments will be made, as per Occupational Health advice and support</td>
<td></td>
</tr>
</tbody>
</table>
### BSO Risk Management Strategy including policy statement

<table>
<thead>
<tr>
<th>In developing the policy or decision what did you do or change to address the equality issues you identified?</th>
<th>What do you intend to do in future to address the equality issues you identified?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any associated training will continue to account for diverse needs. On-line training (e-learning) platforms will be compatible with assistive technologies.</td>
<td></td>
</tr>
<tr>
<td>In developing the policy or decision what did you do or change to address the equality issues you identified?</td>
<td>What do you intend to do in future to address the equality issues you identified?</td>
</tr>
<tr>
<td>---</td>
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</tr>
<tr>
<td>The Portal will be phased in to use for all members, who will continue, for a number of months, to receive their papers via email (and hard copy where requested)</td>
<td>A number of 'Change Champions’ will be appointed to ‘pilot’ the roll out of the Portal and act as Leads, giving advice and guidance to other committee members. Use of the Portal will be phased in, and members will be afforded papers via email or hard copy if that is their request</td>
</tr>
<tr>
<td>Staff will be trained in how to use the portal</td>
<td></td>
</tr>
<tr>
<td>All Committee members will be trained, through demonstration, in how to access and use the portal, with enhanced training for those that require it.</td>
<td></td>
</tr>
<tr>
<td>ORECNI will liaise with the Health Research Authority in England, to ensure that the portal is compatible with assistive technologies, including tablets.</td>
<td></td>
</tr>
</tbody>
</table>
Section 75
Equality Action Plan
2013 – 2018

Business Services Organisation

This document can be made available on request and where reasonably practicable in an alternative format, Easy Read, Braille, audio formats (CD, mp3 or DAISY), DVD, large print or other languages to meet the needs of those for whom English is not their first language.

Updated June 2015
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</thead>
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<td>3</td>
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<td>3</td>
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<td>What we do</td>
<td>4-5</td>
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<tr>
<td>What is in our equality action plan?</td>
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</tr>
<tr>
<td><strong>Theme 1: Accessibility of Information and Services</strong></td>
<td></td>
</tr>
<tr>
<td>Action Measure 1: Equality Unit (updated)</td>
<td></td>
</tr>
<tr>
<td>Action Measure 2: Family Practitioner Services (updated)</td>
<td></td>
</tr>
<tr>
<td>Action Measure 3: HSC Pensions (updated)</td>
<td></td>
</tr>
<tr>
<td>Action Measure 4: Legal Services (carried over)</td>
<td></td>
</tr>
<tr>
<td><strong>Theme 2: Systems, Information Sharing and Monitoring</strong></td>
<td></td>
</tr>
<tr>
<td>Action Measure 1: Equality Unit (updated)</td>
<td></td>
</tr>
<tr>
<td><strong>Theme 3: User Engagement</strong></td>
<td></td>
</tr>
<tr>
<td>Action Measure 1: Family Practitioner Services (updated)</td>
<td></td>
</tr>
<tr>
<td><strong>Theme 4: Using Our Influence</strong></td>
<td>6-20</td>
</tr>
<tr>
<td>Action Measure 1: Information Technology Services (updated)</td>
<td></td>
</tr>
<tr>
<td><strong>Theme 5: Awareness Raising and Training</strong></td>
<td></td>
</tr>
<tr>
<td>Action Measure 1: HSC Pensions (updated)</td>
<td></td>
</tr>
<tr>
<td>Action Measure 2: Human Resources (carried over)</td>
<td></td>
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<tr>
<td>Action Measure 3: Human Resources</td>
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<td><strong>Theme 6: Driving the Mainstreaming of Equality</strong></td>
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<tr>
<td>Action Measure 1: Customer Relations &amp; Service Improvement (updated)</td>
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</table>
Introduction

In 2010 the Equality Commission NI asked the Business Services Organisation to develop an action plan outlining actions to promote equality of opportunity and good relations and address inequalities. Our first action plan was developed for a period of two years (2011-2013), to align it with our corporate and business planning cycles at the time. This document presents the reviewed and updated action plan.

From a corporate planning perspective, this plan is aligned with the BSO strategic objective “To Ensure Good Governance”.

Equality scheme commitments

Our action plan outlined actions related to our functions and took account of our equality scheme commitments relating to Section 75 of the Northern Ireland Act 1998. Our equality scheme is available on our website: www.hscbusiness.hscni.net

The law requires us when we carry out work that we promote equality of opportunity across nine equality categories; age, gender, disability, marital status, political opinion, caring responsibilities, sexual orientation, religion and ethnicity. It also requires us to consider good relations in relation to political opinion, religion and ethnicity.

In our equality scheme we gave a commitment to monitoring progress and updating the plan as necessary. We also said we would engage and consult with stakeholders when reviewing the action plan.

During the last two years we have kept our equality action plan under review and reported annually, to the Equality Commission, on what we have done.

How we carried out the review

As we are coming to the end of our two years we undertook a larger scale review, to consider what actions to include in our new equality action plan.
In carrying out our review we considered a number of questions.

1. Have actions been delivered? If not these were carried over into our new plan.
2. Have intended outcomes been achieved? If actions were delivered but the intended outcome has not been achieved we carried over the priority into the new plan with new actions.
3. Were there actions identified in our first audit of inequalities but not prioritised for our first plan? If these are still relevant we carried them over into the new plan.

We also looked at a range of sources of information such as:
- new research
- new data having become available
- new equality screening exercises having been completed
- issues raised in consultations or through other engagement with staff and service users since our first action plan.

From this we considered if new actions needed to be developed for 2013-2018.

**What we do**

The Business Services Organisation is part of health and social care in Northern Ireland. We were set up in April 2009.

**We do things like:**

- Provide medical cards to allow people to go to their doctor and the hospital.

- We let people know when they need to get checks on their health. Such as cervical and bowel cancer screening.

- We help staff working in health and social care to get their pensions.

- We check out if the money dentists, doctors, opticians and pharmacists get for their services is correct and we pay them.

- We buy goods and services that health and social care organisations use for patients and clients like gloves or band-aids.
Our lawyers provide help to health and social care organisations in cases that go to court.

We need to make sure we have enough money to pay for the services.

We also provide money advice to other health and social care organisations.

We work with other health and social care organisations to make sure that we all obey the laws about employment, services, ethics, equality and human rights.

We provide corporate services that help with the day to day running of the Business Services Organisation for example health and safety, buildings where staff work and handling complaints.

We make sure that we make it easy for people to find out about what we do by keeping our website up to date.

We draw up contracts with our customers and check out if they are happy with our services. We carry out surveys.

What is in our equality action plan?

The following section outlines our actions for the next five years. We will keep this plan under regular review and report annually on progress to the Equality Commission for NI. It is thus a live document, not least given the additional functions which will be assigned to the BSO in the timespan of this plan. We will undertake a wider review in five years. We will involve Section 75 equality groups and individuals in this review. This document is also available on our website: [www.hscbusiness.hscni.net](http://www.hscbusiness.hscni.net)
Scope of the objective
To agree an approach to the provision of accessible formats for BSO

Potential benefits (including, if relevant, Return on Investment)
- Staff are clear about their roles and responsibilities
- Information and communication needs of older people, young people, those with sensory impairments, people with a learning disability, people with physical disabilities, and minority ethnic people are addressed
- Criteria for prioritising actions are agreed and recorded to ensure that information is provided in alternative formats on request, where reasonably practicable

Risk of not taking action
- Non-compliance with best practice or research evidence
- Legal challenges under Disability Discrimination Act

What needs to be done
- Adapt and adopt regional policy.
- Raise awareness of policy amongst service users and staff.
- Take lead responsibility for engaging with partner organisations to maximise collaboration in implementing the policy.
- BSO will agree an approach for provision of information in alternative formats and identify any gaps
- Develop business cases and costing for prioritised areas if required.
- Review policy and its implementation.

Lead Responsibility
Director of Human Resources

Timeline
September 2015 – for adopting policy
March 2016 – for other actions
March 2018 – for review

**Resource implications**
staff time: 10 working days senior staff

**How we will monitor impacts**
- customer satisfaction surveys and feedback
- number of requests for information by type of format
Scope of the objective
Family Practitioner Services: Call/Recall Services for Bowel Cancer Screening – Improved access to helpline

Potential benefits (including, if relevant, Return on Investment)
- Remove barriers to accessing Bowel Cancer Screening helpline for service users not fluent in English and those with hearing impairments
- Increase uptake of cancer screening
- Reduction of follow up costs and health care costs

Risk of not taking action
Legal challenges under Disability Discrimination Act

What needs to be done
- Explore the potential for the use of a range of communication methods to improve accessibility for those with sensory impairments including SMS text message facility and Text Relay
- Advertise all options for accessing advice and support services including number of text relay, SMS text messaging (in all correspondence) and availability of telephone interpreting services
- Engage with the Screening Programme Manager in the Public Health Agency to ensure that any information on screening for bowel cancer (and cervical cancer) includes accessibility details as per the options noted above
- Sign off changes in relation to accessibility to screening letter
- Discussions with RNIB to improve communication and raise awareness of Bowel cancer Screening programme for those with visual impairment.

Lead Responsibility
Cancer Screening Call/Recall Manager
- With support from Equality Unit
- In Engagement with PHA Communication and Quality-Assurance functions
Timelines
End March 2014

Resource implications
- Staff time (development of protocols, administration of providing advice and support in range of formats noted above)
- Potentially equipment costs (mobile phone or software to enable communication between PC and mobile phones)

How we will monitor impacts
- Customer survey
- Engagement with users and representative groups
- Log of requests in alternative formats
Scope of the objective
HSC Pensions: Improved access to Pension information

Potential benefits (including, if relevant, Return on Investment)
Remove barriers to accessing pensions information for service users (current employees and pensioners) who have hearing and sight impairments

Risk of not taking action

What needs to be done

- Develop protocols to advise all staff of procedures to follow for responding to requests in different formats and these could include for plain language, large print, CD accessible electronic formats including use of the website.

Lead Responsibility
Head of HSC Pension Services

Timeline
March 2014

Resource implications
Staffing resources initially

How we will monitor impacts
Quarterly system usage reports

This Action Measure has been completed.
Scope of the objective
Legal Services: Review finance processes within the Directorate of Legal Services relating to payments including payment of damages and claimants’ costs following settlement of claims to minimise delays

Potential benefits (including, if relevant, Return on Investment)
Delays in payments, which may disproportionately affect people with a disability, are minimised

Risk of not taking action
Not an issue in view of existing controls

What needs to be done
- Continue to review current administrative finance processes
- Continue with financial audit processes to identify any unreasonable delays
- Continue to implement any recommendations from financial audit outcomes

Lead Responsibility
Chief Legal Adviser

Timeline
Ongoing in line with financial audit plan

Resource implications
No additional resources required

How we will monitor impacts
Internal financial auditing processes
Theme 2: Systems, Information Sharing and Monitoring

Action Measure 1

**Scope of the objective**
Quantitative data: Up to date evidence base to inform policy development and screening

**Potential benefits (including, if relevant, Return on Investment)**
BSO decision-making is informed by robust equality evidence

**Risk of not taking action**
- Non-compliance with best practice

**What needs to be done**
- Collect staff equality data
- Ensure and advise managers of easy access to summary equality data for policy development and screening
- Prepare and disseminate key 2011 Census data to support policy development and screening

**Lead Responsibility**
Human Resource
Equality Unit

**Timeline**
March 2014

**Resource implications**
- staff time: Equality Unit 10 working days senior staff
- staff time: Human Resources

**How we will monitor impacts**
review completed screening documentation for robustness of evidence provided

This Action Measure has been completed.
Scope of the objective
Family Practitioner Services: Needs of Section 75 groups are taken into consideration in the planning, design and delivery of BSO Cancer Screening Services (Call/Recall and Helpline)

Potential benefits (including, if relevant, Return on Investment)
- Collaborative working with the PHA
- Continuous improvement of services and their accessibility

Risk of not taking action

What needs to be done
- Engage with Programme Manager in the Public Health Agency to secure Family Practitioner representation in any future reference group in relation to cancer screening services
- Engage with service users and representative groups
- Meeting held with Gender Reassignment Group regarding gender change protocols for Patient Registration, Cytology and Breast Screening Services. Further exploration required with the Health & Care Index team and PHA.

Lead Responsibility
Cancer Screening Call/Recall Manager

Timeline
March 2014

Resource implications
Staff time to attend any reference group meetings and engagement events: 2 working days senior staff

How we will monitor impacts
feedback from service users
Scope of the objective
Information Technology Services: Improved protocols and systems are in place to enhance the sharing of relevant patient information across HSC organisations.

Potential benefits (including, if relevant, Return on Investment)
- Information is shared in compliance with data protection, ICT Policies, human rights and other relevant legislative requirements.
- Needs of a diverse range of service users are addressed.
- Efficient utilisation of ICT
- More focused patient care
- Contributes to patient safety
- Supports more efficient ‘out of hours’ care
- Minimises duplication
- Supports health and wellbeing strategy.

Risk of not taking action
Potential challenges under Disability Discrimination Act. Not realising full potential of ICT

What needs to be done
- Continue to work with HSC Board, regional HSC organisations and the DHSSPS to progress the development of information sharing arrangements.
- Ensuring that HSC service users etc. are fully aware of scope for information sharing across applications/systems, including training, where appropriate.
- Ensuring that relevant professional groups endorse proposals.
- Ensuring that relevant legislative requirements are adhered to.
- Electronic Care Record which went live during June 2013 now contributes to the collation of information from disparate
IT systems and the sharing of information across a wide number of groups in accordance with agreed protocols.

- Continue to consult with appropriate decision-makers, representative groups and affected individuals at the technology design stage.

**Lead Responsibility**

Assistant Director of Information Technology Services

**Timeline**

Sharing of information is already promoted on an ongoing basis whenever it is practicable to do so.

**Investigate scope for capturing patient/client disability, ethnicity and other data related needs in Health and Care Number at replacement stage.**

**Resource implications**

- Staff time in development of protocols, etc.
- Enhanced specifications
- Implementation and training

As resourcing implications would be specific to individual system requirements, this cannot be quantified until system specification and scoping was undertaken as part of individual procurements.

**How we will monitor impacts**

- Customer surveys
- Service User Groups
Scope of the objective
HSC Pensions: Increased capacity of staff to identify and meet the range of needs of service users through direct involvement of representative groups in learning and development opportunities

Potential benefits (including, if relevant, Return on Investment)
Older people / those affected by dementia (cognitive impairments) have equality of access to information relating to their pensions

Risk of not taking action

What needs to be done
- Include relevant equality information about the needs of older people and those with dementia in staff induction programme.

Lead Responsibility
Head of HSC Pension Services

Timeline
March 2014

Resource implications
Staff resources to organise meetings with representative groups

How we will monitor impacts
Monitor staff understanding through appraisal process and Customer Survey

This Action Measure has been completed.
Theme 5: Awareness Raising and Training
Action Measure 2

Scope of the objective
Human Resources: Increased capacity of line managers to identify and respond to the range of Section 75 (equality and good relations) needs of their staff through access to guidance materials

Potential benefits (including, if relevant, Return on Investment)
- Healthy, productive and engaged workforce
- Retention of staff
- Supports health and wellbeing strategy
- Opportunity to roll out across BSO and partner organisations in order to optimise use of resources

Risk of not taking action

What needs to be done
- Produce guidance resource for line managers on how best to support staff from different Section 75 groups
- Engage with managers, relevant voluntary sector groups and trade unions
- Disseminate and raise awareness of resource

Lead Responsibility
Assistant Director of Human Resources (Operations) and Assistant Director (Workforce Planning and Organisational Development) with support from Equality Unit

Timeline
By June 2015 – Drafting; By September 2015 - Engagement

Resource implications
- Staff time: 5 working days senior staff HR; 5 working days senior staff Equality Unit

How we will monitor impacts
- Staff survey
- Number of grievances
- Feedback from users forum and small agencies forum
Scope of the objective
Human Resources: BSO supports staff who identify as trans* in meeting their particular needs in the workplace linked to their gender identity

Potential benefits (including, if relevant, Return on Investment)
- Retain and attract trans* staff
- Demonstrate commitment to inclusive workplace

Risk of not taking action
Breach of anti-discrimination legislation and data protection act due to staff lack of knowledge

What needs to be done
- Liaise with regional Human Resources and equality colleagues to explore scope for HSC-wide policy
- Develop policy drawing on best practice and in engagement with trade unions, trans people and groups
- Consult on policy
- Adopt policy
- Raise awareness of policy amongst line managers

Lead Responsibility
Assistant Director of Human Resources (Operations) with support from Equality Unit

Timeline
By Dec 2016

Resource implications
Staff time: 1 working day senior staff HR; 10 working days senior staff Equality Unit

How we will monitor impacts
Policy in place
Line managers’ awareness raised
Theme 6: Driving the Mainstreaming of Equality

Action Measure 1

**Scope of the objective**
Customer Relations and Service Improvement: BSO service providers give assurance to customers that their services comply with equality of opportunity and human rights legislation

**Potential benefits (including, if relevant, Return on Investment)**
- Trigger for BSO service providers of their equality duties
- Demonstrable evidence of mainstreaming

**Risk of not taking action**

**What needs to be done**
Add clause detailing BSO commitment to equality duties for inclusion in service level agreements

**Lead Responsibility**
Assistant Director Customer Relations and Service Improvement

**Timeline**
By April 2013

**Resource implications**
None

**How we will monitor impacts**
Clause in SLA
2 Franklin Street
Belfast
BT2 8DQ
Disability Action Plan
2013-2018

Business Services Organisation (BSO)

What we did between April 2015 and March 2016

If you need this document in another format please get in touch with us. Our contact details are at the back of this document.

You can find our Disability Action Plan on our website: http://www.hscbusiness.hscni.net/services/2352.htm
(1) Communication

<table>
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</table>
| 2. Put in place contractual arrangements for the production of materials in alternative formats.  
  - Undertake a scoping exercise by type of format based on current and best practice in UK  
  - Where appropriate undertake tender exercise and put contracts in place | Alternative accessible formats are more readily available | Arrangements are in place to support staff in procuring materials in alternative formats  
Contracts in place where appropriate | BSO Equality Unit  
Year 3 |

Relevant Duty: Encourage participation of disabled people in public life.

What we did over the last year

- Our procurement colleagues looked at contracts that health organisations in Great Britain have for other formats. Next year, we will discuss with colleagues from other health and social care organisations what we should do. Our procurement colleagues help us with this.
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<tbody>
<tr>
<td>3. To agree an approach to the provision of accessible formats for BSO</td>
<td>Improved accessibility of information</td>
<td>Common wording relating to alternative formats for inclusion in documents. Protocol on how to deal with requests for alternative formats. For electronic communication, staff are supported to ensure that settings meet needs regarding accessible font size.</td>
<td>Senior Management Team</td>
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<td>Year 2</td>
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<td>BSO Information Technology Services (ITS)</td>
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Relevant Duty: Encourage participation of disabled people in public life.

What we did over the last year

- This work is still in progress. We will finish this before the end of September 2016.

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<tbody>
<tr>
<td>4. Develop a Corporate Style Guide for BSO publications to ensure they meet minimum standards for accessibility for disabled people.</td>
<td>Improved accessibility of information</td>
<td>Corporate Style Guide</td>
<td>Administrative Services Manager, Corporate Services</td>
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<td>Year 3</td>
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</table>
Relevant Duty: Encourage participation of disabled people in public life.

What we did over the last year

- All policies are now written in Arial 14 which should assist readers with a sight impairment. We will develop a style guide next year.

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<tbody>
<tr>
<td>5. Identify and improve opportunities for a person with a disability to communicate with Counter Fraud and Probity Services</td>
<td>Improved access to Counter Fraud and Probity Services</td>
<td>Information leaflet and memo to staff on range of communication methods</td>
<td>Assistant Director Counter Fraud and Probity Services Year 3</td>
</tr>
</tbody>
</table>

Relevant Duty: Encourage participation of disabled people in public life.

What we did over the last year

- A Text Phone Service is available for the public to contact Counter Fraud and Probity Services.
(2) Awareness Raising and Training

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<tbody>
<tr>
<td>6. Prompt staff to keep up to date their personal equality monitoring records (via self-service on new Human Resources IT system)</td>
<td>More accurate data in place.</td>
<td>Prompt issued to staff on a regular basis. Increase in completion of disability monitoring information by staff to 85%</td>
<td>Human Resources Year 2 onwards</td>
</tr>
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</table>

Relevant Duty: Promote positive attitudes towards disabled people.

What we did over the last year

- This year for six weeks we ran a campaign to encourage our staff to tell us whether or not they have a disability. We sent emails and put up posters. In our organisation staff themselves can keep their equality data up to date on a database. We can’t make staff do that. We can only ask them to do so and explain why it is good for them to let the organisation know if they have a disability.

- When we looked at the data afterwards we saw that only a few more people filled in this information. Overall, 67.16% of staff have completed this data. Less than 1% of our staff have said that they have a disability. The changes are really small. So we need to keep working on this.

- When we asked staff what puts them off some told us they are afraid that they will be treated unfairly if they say that they have a disability. Others said they don’t think that the organisation needs to know that they have a disability. We want to talk to our disability staff forum next year what we else we could do.
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<tr>
<td>7. Raise awareness of specific barriers faced by people with disabilities including through linking in with National Awareness Days or Weeks (such as Mind your Health Day).</td>
<td>Increased staff awareness of the range of disabilities and needs.</td>
<td>Two annual Awareness Days profiled &gt;50% of staff participating in the evaluation indicate that they know more about people living with disabilities as a result of the awareness days.</td>
<td>Equality Unit Year 1 onwards Equality Unit Year 3</td>
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**Relevant Duty:** Promote positive attitudes towards disabled people.

**What we did over the last year**

- We featured two disability awareness days again this year. These were Hearing Loss and Deafness in September and Learning Disabilities in January 2016.
- Staff and volunteers from Action on Hearing Loss came to some of our offices and spoke about the experience of living with sight loss. They also offered doing hearing tests. We were surprised how many staff wanted to get this test done on the day.
- In January, Mencap and the Evergreen Centre helped us raise awareness of learning disabilities. They gave a talk and brought a lot of information with them.
- On both days we also put together a leaflet for staff. These were part of our series called ‘Disability Insight’ with key information. We also provided links to videos with testimonials from people who live with these conditions. We wanted staff to have the chance to listen to people with a disability first hand.
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<tbody>
<tr>
<td>8. Engage with disabled colleagues and representative groups with a view to publicising at least two articles annually in the BSO internal newsletter, Business Matters</td>
<td>Increased staff awareness of the disabilities and needs</td>
<td>Business Matters Articles</td>
<td>Assistant Director, Customer Care and Performance Year 3 onwards</td>
</tr>
</tbody>
</table>

**Relevant Duty: Promote positive attitudes towards disabled people.**

**What we did over the last year**

The Equality Unit published a total of six articles on disability during 2015-16 in *Business Matters*:
- April 2015 - Benefits of Equality, diversity and human rights
- May 2015 - Disability Champion for BSO
- August 2015 - Disability work placements in BSO
- September 2015 - Disability Awareness Days
- January 2016 - Work Placement Scheme for People with a disability
- March 2016 - HSC Disability Staff Network

During 2016-17 we will lead on the engagement with disabled colleagues with a view to draft and publish two articles.
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<tbody>
<tr>
<td>9. In collaboration with people with a disability review current guidance and produce revised guidance on support for staff with a disability.</td>
<td>Staff with a disability are supported and staff are empowered to provide support.</td>
<td>Guidance in place for staff with a disability on what support is available. Guidance promoted via websites, newsletters, emails</td>
<td>Human Resources Year 3</td>
</tr>
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</table>

**Relevant Duty: Promote positive attitudes towards disabled people.**

**What we did over the last year**

- We looked through websites to see what other organisations have done.
- Next year we want to speak to our disability staff forum about what information they think would be helpful for staff with a disability to receive. After that, we want to speak with disability organisations about their thoughts. Then we want to put together a guidance document.

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<tbody>
<tr>
<td>10. In collaboration with disabled people design, deliver and evaluate training for staff and Board Members on disability equality and disability legislation.</td>
<td>Increased staff and Board Member awareness of the range of disabilities and needs and increased ability to facilitate individuals’ disability needs.</td>
<td>Between April 2015 and March 2018 the % of staff and Board Members who have successfully completed the disability module of Discovering Diversity has doubled each year (baseline</td>
<td>Directors with support from BSO Equality Unit and BSO Human Resources</td>
</tr>
</tbody>
</table>
- Facilitate Disability Awareness Training at the annual Business Planning Event and Annual Administrative Staff Event

- Facilitate Disability Awareness Training at an Internal Audit Staff Workshop

- Include at least one speaker on relevant disability issues at team meeting per year

- Invite a speaker from a disability group to present at our quarterly staff engagement session

2015: 12% of staff)
Training evaluations (where relevant)
Record of consideration of training needs

Year 3
Head of Clinical Education Centre
Year 3 & 4
Head of Internal Audit
Year 4
Assistant Director Counter Fraud and Probity Services
Year 3 onwards
Head of HSC Pension Service
Year 3 onwards
• Arrange awareness training for staff to accommodate the assimilation of staff with specific disabilities e.g. Asperger’s Syndrome

• Explore bespoke training for those staff who deal with disabled clients (mainly Community Equipment and Continence Service)

• Incorporate the Disability Duties of the Disability Discrimination Order 2006 into the training provided to Clients on Section 75 and the Disability Discrimination Act 1995

**Relevant Duty: Promote positive attitudes towards disabled people.**
What we did over the last year

- By end March, we found that only 15% of our staff had done eLearning training on disabilities. This is up from 12% last year. During the year we started producing a new eLearning module on equality awareness. We work with colleagues in the BSO and Health and Social Care Trusts on this. The module includes awareness of the law regarding people with a disability. Next year, we want to do a short campaign to raise awareness of the modules and get more staff to complete them.

- **Clinical Education Centre**
  We did not facilitate this training this year. In our event this year we focused on equality and human rights screening. We will do so in 2016-17.

- **Counter Fraud and Probity**
  During 2015-16 we looked at a range of equality issues in how we deliver our work. This included a discussion of disability issues. It involved awareness raising about the range of disabilities in the Northern Ireland population, statistics from the Census and from reports from the voluntary sector. We also looked at some of the needs of people with a disability as they are relevant for what we do.

- **HSC Pensions**
  We have had no success as yet in getting a disability group to talk to staff. However, the new Pension Liaison manager will be requesting from employers suggestions on how HSC Pension Service can engage and interact with staff with a disability in the workplace.

- **Family Practitioner Services**
  We did not deliver any specific session this year. In 2014/15 we had delivered a session on autism. We will look into this again for 2016-17.
**Procurement and Logistics Service**
The PaLS Equality Forum representative and Community Equipment Continence Service Manager met with BSO Equality Manager to scope the training required. We decided that the main training required is about the needs of three groups of people that the team has contact with: people with a learning disability, people who have sensory impairments and people living with dementia. We also decided that the training should be very practical and involve role play. We then linked with colleagues in the Trusts to find out whether any of them have delivered sessions on inclusive customer care before together with people who have a disability. The session is to take place in 2016-17 after the summer.

**BSO Directorate of Legal Services**
The Disability Duties under the 2006 Order have been incorporated into several training sessions for clients, for example, sessions on Human rights and Equality in Procurement delivered to planning, commissioning and contracting staff in the Board, South Eastern, Southern and Belfast Trusts over the last few months.

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</thead>
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<tr>
<td>11. Influence contractor for Community Equipment and Continence Service to have all drivers trained in disability awareness.</td>
<td>People with a disability experience interaction with drivers positively</td>
<td>Record of communication to contractor</td>
<td>Assistant Director Procurement and Logistics Service Year 3</td>
</tr>
</tbody>
</table>

**Relevant Duty: Promote positive attitudes towards disabled people.**
What we did over the last year

- This is linked with the training we are planning for the autumn 2016. See information under #10 above.
### (3) Getting people involved in our work, Participation and Engagement

<table>
<thead>
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</thead>
</table>
| 12. Identify, provide and promote opportunities for more engagement for people with a disability in key work areas. | Better engagement of people with a disability (adults and children where relevant) in key areas. | Annual review of progress to ECNI.  
Programme development group membership list                                                                 | Directors and Assistant Directors  
Year 1 onwards  
Head of Clinical Education Centre  
Year 3 onwards |
| • **Clinical Education Centre:**  
Identify and facilitate the involvement of disabled people in our work, such as in relation to the Knowledge Understanding Framework and as programmes are reviewed or new programmes are being developed. | | | |
* **IT Services:**
  Work with Bamford Monitoring Group on Mental Health and Learning Disability to seek views on what information should be contained within the Northern Ireland Electronic Care Record (NIECR). NIECR will update the Bamford Group on Mental Health and Learning Disability to inform group of progress.

* **Office for Research Ethics Committees:**
  Target applications for ethics committees from Disabled People during recruitment exercises: liaise with Disability Action to discuss option for OREC to present to member organisations about the role of committees and value of committee membership.

| Meeting minutes | Record of engagement Recruitment advertisements | Head of Information Technology Services Year 3 | Head of Office for Research Ethics Committees Northern Ireland (ORECNI) Year 3 onwards |
in advance of recruitment exercise

- **Procurement and Logistics Service:** Where contracts may benefit from input by disabled patients/clients PaLS staff to suggest this to the Contract Adjudication Group (and record in Pre-tender Minutes)

- **HSC Pensions:** Participation as a member of new Pension Board: request DHSSPS Policy team to promote interest from disability groups when appointing Pension Board.

<table>
<thead>
<tr>
<th>Relevant Duty: Encourage participation by disabled people in public life.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>What we did over the last year</strong></td>
</tr>
</tbody>
</table>

Pre-tender Minutes

Record of communication to DHSSPS

Assistant Director Procurement and Logistics Service Year 3 onwards

Head of HSC Pension Service Year 3

92
• Clinical Education Centre:
  o CEC continues to facilitate the contribution of service users (including those with a disability) to a range of our programmes including, for example, Bobath, Wheelchair Training for Occupational Therapists.
• IT Services:
  o The NI Electronic Care Record (NIECR) team completed discussions with Bamford Group for Mental Health and Learning Disability as well as representative PCC group. This informed the decision to bring selected, mental health information into NIECR with appropriate safeguards implemented via the NIECR Role Based Access and Control model. **This work is now done.**
• Office for Research Ethics Committees:
  o In the last financial year there has been no recruitment for the Health and Social Care Research Ethics Committees at ORECNI. This will be followed up this year in advance of a planned recruitment round.
• Procurement and Logistics Service
  o BSO PaLS have introduced into all Tender Strategies the following action for consideration by the Trust decision makers: Engagement by the Contract Adjudication Group of product/service users in the tendering process (with particular reference to disabled persons where appropriate). **This work is now done.**
• HSC Pensions
  o We requested that the Policy promoted interest from disability groups for the new Pension Boards. The Pension Board has now been established. **This work is now done.**
<table>
<thead>
<tr>
<th>Action Measure</th>
<th>Intended Outcome</th>
<th>Performance Indicator and Target</th>
<th>Timescale and Ownership</th>
</tr>
</thead>
</table>
| 13. Explore scope and interest in the establishment of a forum for staff on disability (open to staff with a disability, carers of people with a disability and those with an interest, including trade unions).  
  - Engage with HSC Trusts to establish current practice  
  - Develop regional approach to complement current structures  
  - Engage with staff  
  - Put forum in place and promote to staff | Better involvement of staff with a disability in decision-making. | Options paper  
  Staff survey responses.  
  HR Directors Forum Minutes  
  Forum Terms of Reference. | Senior Management Team/BSO Equality Unit  
 Year 2 onwards |

**Relevant Duty:** Encourage participation by disabled people in public life.

**What we did over the last year**

- We did a survey with our staff to find out about their ideas for a staff forum. Across all our organisations together 852 staff did the survey. After it, we invited staff to meetings to tell us more. We talked about what the forum should look like, who should be able to join it and what could people put off from taking part.
These discussions really helped us.

- We then ran a competition to choose a name for the forum. In March 2016, we launched the forum. We invited all our staff to come.

- This work is now completed.
### Recruitment and Retention

<table>
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<tr>
<th>Action Measure</th>
<th>Intended Outcome</th>
<th>Performance Indicator and Target</th>
<th>Timescale and Ownership</th>
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</thead>
</table>
| 17. Offer mentoring opportunities for young adults and older adults with disabilities as appropriate. | - Review best practice  
- Engage with disability organisations  
- Produce guidance  
- Identify mentors  
Experience of people with a disability in the workplace is meaningful and any need for additional support is identified at an early stage. | Guidance document  
Annual Progress Report to ECNI.                                                                                                      | BSO Human Resources Year 2 |

**Relevant Duty:** Encourage participation by disabled people in public life.

**What we did over the last year**

- As we said last year, we think that staff who have a disability themselves are the ones who should decide on this. We therefore want to bring this suggestion to the staff forum next year.

<table>
<thead>
<tr>
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</thead>
</table>
| 18. Create and promote meaningful placement opportunities including             | People with a disability gain meaningful work                                                      | Guidance paper.  
Increased number of                                                                                           | BSO Equality Unit         |
for people with disabilities in line with good practice and making use of voluntary expertise in this area. Produce practical guidance on process and external support available.

<table>
<thead>
<tr>
<th>Experience.</th>
<th>Placements provided.</th>
<th>Placement participants' feedback from evaluations.</th>
<th>Managers' feedback from evaluations</th>
</tr>
</thead>
<tbody>
<tr>
<td>BSO Human Resources Year 1 onwards</td>
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</table>

Relevant Duty: Encourage participation by disabled people in public life AND promote positive attitudes.

**What we did over the last year**

- We sent information to all our senior managers about placements. We asked them to have a think whether they could offer a placement for a person with a disability. We told them about how the placements work and what they need to do. We learned from our experience of hosting people last year. They told us what went well. They were also able to tell us what we need to do differently.

- We offered 12 placements in total. Eight people with a disability started with us in December. They will spend 26 weeks on their work placement. They work in our Procurement and Logistics Service, Counter Fraud and Probit Services and in IT Services. Half way through their placement we offered them training on how to apply for jobs in Health and Social Care. We also took them through mock interviews.

<table>
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<tbody>
<tr>
<td>19. Encourage disabled people to apply for employment opportunities and remain in the workforce (for example attend career fairs, include welcoming statement and issue job</td>
<td>Greater numbers of people with a disability apply</td>
<td>Increase in disability marked on equal opportunities monitoring forms and HRPTS</td>
<td>BSO Human Resources Year 3</td>
</tr>
</tbody>
</table>
adverts to local disability organisations, more flexible working arrangements, review job descriptions, guaranteed shortlisting policy).

**Relevant Duty: Encourage participation by disabled people in public life.**

**What we did over the last year**

- Again, we think that staff who have a disability themselves are the ones who should decide how we best do this. We therefore want to bring this suggestion to the staff forum next year.

(5) **Additional Measures**

- We always include Disability on our list of things to talk about at our quarterly Equality Forum with our partner organisations.

- We report on progress against our Disability Action Plan to our Board and Senior Management Team (the people at the top of our organisation).

(6) **Encourage Others**

- We include questions relating to the two duties in our equality and human rights screening form. The screening form is completed for all policies and decisions. This includes work that involves other Health and Social Care organisations.

(7) **Monitoring**

98
• We evaluated what difference our campaign made to encourage staff to fill in their disability information on the Human Resources IT system.

• In March we set up a meeting with those who are on a work placement with us under the Disability Scheme and with their Employment Support Officers. This will help us to evaluate how the scheme went this year. We will also invite all their placement managers to a meeting when placements finish in June.

(8) Revisions

• During 2014-15 we had asked all the teams in our organisation to have a think about what else they could do to promote positive attitudes and to give people with a disability more chances to be involved in our work. We wanted to make sure that all parts of our organisation take part. They came up with new ideas. In June 2015 we published our updated plan.

(9) Conclusions

We completed four actions (#6,7,13,18).

We have not yet done what we said we would do under actions #8,9,17,19. This is because we think that staff who have a disability themselves are the ones who should decide on this. We therefore want to bring this suggestion to the staff forum once it is up and running. We will do this before the end of June 2016.

We still have some work to do to complete action #2,5,10,11,12.

All of the actions in our action plan are at regional and at local level.

Our action plan is a live document. If we make any big changes to our plan we will involve people with a disability. We will tell the Equality Commission about any changes.
Disability Action Plan
2013-2018

Business Services Organisation (BSO)

Updated June 2016
<table>
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<th>What is in this report?</th>
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<td>What we do</td>
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<td>What are we going to do</td>
<td>10</td>
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<td>Action Plan</td>
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</table>
Accessibility statement

We will consider any request for this document in another format or language.

Please contact us at:

Equality Unit
Business Services Organisation
2 Franklin Street
Belfast BT2 8DQ
Phone: 028 9536 3961 prefix with 18001 for Text Relay
Email: Equality.Unit@hscni.net
Introduction

The Business Services Organisation has to follow the law which says that in our work we have to

- promote positive attitudes towards disabled people; and
- encourage participation by disabled people in public life.

The law also says that we have to develop a disability action plan. We have to send this plan to the Equality Commission. The plan needs to say what we will do in our work to make things better for people with disabilities.

As Alexander Coleman and Liam McIvor – Chairman and Chief Executive of the Business Services Organisation – we want to make sure we do this in a way that makes a difference to people with a disability. We will put in place what is necessary to do so. This includes people, time and money. Where it is right to do so, we will include actions from this plan in the yearly plans we develop for the organisation as a whole. These are called ‘corporate’ or ‘business' plans.

We will also put everything in place in the organisation to make sure that we do what we have to under the law. This includes making one person responsible overall for making sure we do what we say we are going to do in our plan.

We will make sure we let our staff know of what is in our plan. We will also train our staff and help them understand what they need to do.

The person in our organisation who is responsible for making sure that we do what we have promised to do is Karen Bailey.

When you have any questions you can contact Karen Bailey at:

Name: Karen Bailey
Title: Director of Customer Care and Performance
Address: BSO, 7th Floor, 2 Franklin Street, Belfast, BT2 8DQ
Telephone number: 028 95 363859 prefix with 18001 for Text Relay
Email: Karen.Bailey@hscni.net
Every year we will write up what we have done. We will also explain when we haven’t done something. We will send this report to the Equality Commission. We will also publish this report on our website:

www.hscbusiness.hscni.net

We have a look at the plan every year to see whether we need to make any changes to it. If we need to, we write those changes into the plan. Before we make any big changes we talk to people who have a disability to see what they think.

After five years we will look at our plan again to see how we have done. We will also see what else we could do.

Whenever we develop or look at our plan we will invite people who have a disability to help us.

This report and action plan is also available on our website:

www.hscbusiness.hscni.net

Who is included in our plan?

Our plan relates to the following key areas:

- Physical disabilities;
- Sensory disabilities;
- Learning disabilities;
- Mental health disabilities; and,
- Other hidden disabilities.

It also covers people who are included in more than one of these areas. We have other equality laws that require us to promote equality of opportunity across a number of diverse categories. In our plans we need to also think about other factors such as caring responsibilities, age, gender, sexual orientation, ethnicity and marital status.
How we developed this plan

In starting off to develop this plan we looked at what we have done so far to make a difference for people who have a disability. We then read up on what the Equality Commission said would be good to do. This was after they had looked at what other organisations have done.

All this helped us think about what else we could do to make a difference.

We thought it was important to involve people who have a disability in developing our plan. So we invited any of our staff who have a disability to be part of a small group to work on this. We also said that any of our staff who are interested could join.

We then invited disability groups to a meeting to find out what they thought about our ideas. We also asked them whether there was anything else we could do.

What we do

The Business Services Organisation is part of health and social care in Northern Ireland.

We were set up in April 2009.

We do things like:

- Provide medical cards to allow people to go to their doctor and the hospital.
- We let people know when they need to get checks on their health. Such as cervical or bowel cancer screening.
- We help staff working in health and social care to get their pensions.
- We check out if the money dentists, doctors, opticians and pharmacists get for their services is correct and we pay them.
We buy goods and services that health and social care organisations use for patients and clients like gloves or band aids.

Our lawyers provide help to health and social care organisations in cases that go to court.

We need to make sure we have enough money to pay for the services.

We also provide money advice to other health and social care organisations.

We work with other health and social care organisations to make sure that we all obey the laws about employment, services, ethics, equality and human rights.

We provide corporate services that help with the day to day running of the Business Services Organisation for example health and safety, buildings where staff work and handling complaints.

We make sure that we make it easy for people to find out about what we do by keeping our website up to date.

We draw up contracts with our customers and check out if they are happy with our services. We carry out surveys.

We manage and run the Northern Ireland Health and Social Care Interpreting Service.

How people can be involved in our work

The main ways in which people can be involved in the work of the Business Services Organisation are:

- as members of Research Ethics Committees
  Our Office for Research Ethics Committees recruits voluntary committee members by a Public Appointments process to make sure that membership not only includes people such as doctors and nurses but people from the wider community. Members review a range of health and social care research.
This includes clinical trials of drugs, new medical technology and equipment as well as studies involving best practice and treatment.

- **Procurement and Logistics Service**
  When we buy particular goods or services on behalf of other Health and Social Care organisations, we may involve people with a disability. We do this when Health and Social Care organisations think it is really important to make sure we buy the right things for people with a disability, for example contracts for wheelchairs.

- **Clinical Education Centre**
  Our teams involve people with a disability and other service users in some of our training programmes. They may be involved in putting together the programme. They may also help deliver the programme to staff working in health and social care.

- **Leadership Centre**
  We provide training courses and programmes for staff in the health and social care service. From time to time this will involve service users, including those with a disability, in the delivery of the training. We also deliver training for service users on how to be involved in the work of the health and social care service through personal and public involvement.
What we have done up to now

This is some of what we have done already to promote positive attitudes towards disabled people and encourage the participation of disabled people in public life.

Promoting positive attitudes towards disabled people

- We worked on the development of an elearning resource on disability. This resource was launched in May 2011 and is now available to all Health and Social Care staff. All our staff complete the programme at induction.

- We include the disability duties in all Equality Awareness and Screening Training that the Equality Unit delivers.

- In Screening Training we look at how the disability duties can be considered in practice. Whenever staff take decisions they must write down what they have done or plan to do to promote the disability duties in their decision.

- We delivered pilot training sessions on mental health awareness to our staff.

- We developed a staff resource on disability etiquette.

- We produced a signposting resource for our staff. It provides information on support networks in the community for people with a disability and those who care for a person with a disability.

Encourage the participation of disabled people in public life

- The last time we recruited members of our Research Ethics Committees we sent an email directly to disability groups to make them aware and invite them to apply. This was on top of our advertisement in the papers.

- We met with AdaptNI in December 2011 regarding their training programme 'In the Loop'. It supports people with a disability to make their voices heard on committees and in public life positions. We also talked to them about signposting people with a disability who they work with to public life opportunities in our organisation.
• We have put in place a process for publishing screening templates as soon as they are completed. A disability organisation had suggested that we do so. We do the same for publishing the quarterly screening reports.

• When we evaluate training that the Equality Unit delivers we include a question on whether trainees with a disability felt that their needs were met. This helps us to find out whether we need to make any further adjustments.

• We include the disability duties in all Equality Awareness and Screening Training that the Equality Unit delivers.

• In Screening Training we look at how the disability duties can be considered in practice. Whenever staff take decisions they must write down what they have done or plan to do to promote the disability duties in their decision.

• We let our staff, service users and the public know that they can ask for materials in other formats such as in large print or as a CD.

• Browsealoud enabled website.

• We developed a resource for line managers on reasonable adjustments for staff with a disability.

**What we are going to do**

In the table below we list all the actions that we will do. We also say when we will do them.
Action Plan: What we will do to promote positive attitudes towards disabled people and encourage the participation of disabled people in public life

### (1) Communication

<table>
<thead>
<tr>
<th>Action Measure</th>
<th>Intended Outcome</th>
<th>Performance Indicator and Target</th>
<th>Timescale and Ownership</th>
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</thead>
<tbody>
<tr>
<td>1. Work with disabled people to consider the diversity of images used and potential for portraying wider range of individuals when developing information materials including websites · Undertake audit of information materials including website</td>
<td>Disabled people are portrayed in a positive manner</td>
<td>Checklist for authors. Guidance for authors Audit of information materials including website undertaken Annual Review of Progress to ECNI</td>
<td>Business Services Organisation's (BSO) Equality Unit Year 2 onwards</td>
</tr>
<tr>
<td>2. Put in place contractual arrangements for the production of materials in alternative formats. · Undertake a scoping exercise by type of format based on current</td>
<td>Alternative accessible formats are more readily available</td>
<td>Arrangements are in place to support staff in procuring materials in alternative formats Contracts in place where appropriate</td>
<td>BSO Equality Unit Year 4</td>
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</table>
and best practice in UK

- Where appropriate undertake tender exercise and put contracts in place

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<tr>
<td>3. Agree an approach to the provision of accessible formats for BSO</td>
<td>Improved accessibility of information</td>
<td>Common wording relating to alternative formats for inclusion in documents. Protocol on how to deal with requests for alternative formats. For electronic communication, staff are supported to ensure that settings meet needs regarding accessible font size.</td>
<td>Director of Human Resources Year 4 BSO Information Technology Services (ITS) Year 2</td>
</tr>
<tr>
<td>4. Develop a Corporate Style Guide for BSO publications to ensure they meet minimum standards for accessibility for disabled</td>
<td>Improved accessibility of information</td>
<td>Corporate Style Guide</td>
<td>Administrative Services Manager, Corporate</td>
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<tr>
<td>people</td>
<td>Services Year 4</td>
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<tr>
<td>5. Identify and improve opportunities for a person with a disability to communicate with Counter Fraud and Probity Services</td>
<td>Improved access to Counter Fraud and Probity Services</td>
<td>Information leaflet and memo to staff on range of communication methods</td>
<td>Assistant Director Counter Fraud and Probity Services Year 4</td>
</tr>
<tr>
<td>Action Measure</td>
<td>Intended Outcome</td>
<td>Performance Indicator and Target</td>
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<tr>
<td>6. Prompt staff to keep up to date their personal equality monitoring records (via self-service on new Human Resources IT system)</td>
<td>More accurate data in place</td>
<td>Prompt issued to staff on a regular basis.</td>
<td>BSO Human Resources Year 2 onwards</td>
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<td></td>
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<td>Increase in completion of disability monitoring information by staff to 85%</td>
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<tr>
<td>7. Raise awareness of specific barriers faced by people with disabilities including through linking in with National Awareness Days or Weeks (such as Mind your Health Day)</td>
<td>Increased staff awareness of the range of disabilities and needs</td>
<td>Two annual awareness days profiled</td>
<td>BSO Equality Unit Year 1 onwards</td>
</tr>
<tr>
<td>Work with BSO Social Committee to link in with disability groups for volunteering and fund raising.</td>
<td></td>
<td>&gt;50% of staff participating in the evaluation indicate that they know more about people living with disabilities as a result of the awareness days</td>
<td>BSO Human Resources Year 4</td>
</tr>
<tr>
<td>8. Engage with disabled</td>
<td>Increased staff awareness of</td>
<td>Business Matters Articles</td>
<td>Assistant</td>
</tr>
<tr>
<td>No.</td>
<td>Action</td>
<td>Outcome</td>
<td>Responsible Parties</td>
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<tr>
<td>9.</td>
<td>In collaboration with people with a disability review current guidance and produce revised guidance on support for staff with a disability</td>
<td>Staff with a disability are supported and staff are empowered to provide support</td>
<td>BSO Human Resources Year 4</td>
</tr>
<tr>
<td>10.</td>
<td>In collaboration with disabled people design, deliver and evaluate training for staff and Board Members on disability equality and disability legislation.</td>
<td>Increased staff and Board Member awareness of the range of disabilities and needs and increased ability to facilitate individuals’ disability needs</td>
<td>Directors with support from BSO Equality Unit and BSO Human Resources Year 3</td>
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</table>

- Facilitate Disability Awareness Training at the annual Business Planning Event and...
### Annual Administrative Staff Event

- Facilitate Disability Awareness Training at an Internal Audit Staff Workshop
- Include at least one speaker on relevant disability issues at team meeting per year
- Invite a speaker from a disability action group to present at our quarterly staff engagement session
- Arrange awareness training for staff to accommodate the assimilation of staff with

<table>
<thead>
<tr>
<th>Record of consideration of training needs</th>
<th>Centre Year 3 &amp; 4</th>
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<tr>
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<td>Head of Internal Audit Year 4</td>
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<td>Assistant Director Counter Fraud and Probity Services Year 3 onwards</td>
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<td>Head of HSC Pension Service Year 3 onwards</td>
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<td>Assistant Director of</td>
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specific disabilities e.g. Asperger’s Syndrome

- Explore bespoke training for those staff who deal with disabled clients (mainly Community Equipment and Continence Service)

- Incorporate the Disability Duties of the Disability Discrimination Order 2006 into the training provided to Clients on Section 75 and the Disability Discrimination Act 1995 **Completed**

11. Influence contractor for Community Equipment and Continence Service to have all drivers trained in disability awareness

People with a disability experience interaction with drivers positively

Record of communication to contractor

<table>
<thead>
<tr>
<th>Family Practitioner Services</th>
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<tbody>
<tr>
<td>Year 4</td>
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<tr>
<td>Assistant Director Procurement and Logistics Service</td>
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<tr>
<td>Year 4</td>
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<tr>
<td>Assistant Chief Legal Advisor</td>
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<td>Year 3</td>
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</table>
## Getting people involved in our work, Participation and Engagement

<table>
<thead>
<tr>
<th>Action Measure</th>
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<td>12. Identify, provide and promote opportunities for more engagement for people with a disability in key work areas:</td>
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<td>Programme development group membership list</td>
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<td>Head of Clinical Education Centre</td>
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<td>• Identify and facilitate the involvement of disabled people in our work, such as in relation to the Knowledge Understanding Framework and as programmes are reviewed or new programmes are being developed.</td>
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</tbody>
</table>
- **Work with Bamford Monitoring Group on Mental Health and Learning Disability to seek views on what information should be contained within the Northern Ireland Electronic Care Record (NIECR).** NIECR will update the Bamford Group on Mental Health and Learning Disability to inform group of progress. **Completed**

- **Target applications for ethics committees from Disabled People during recruitment exercises:** liaise with Disability Action to discuss option for OREC to present to member organisations about the role of

<table>
<thead>
<tr>
<th>Head of Information Technology Services Year 3</th>
<th>Meeting minutes</th>
<th>Record of engagement Recruitment advertisements</th>
<th>Head of Office for Research Ethics Committees Northern Ireland (ORECNI) Year 3 onwards</th>
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<td>committees and value of committee membership in advance of recruitment exercise</td>
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<td>Where contracts may benefit from input by disabled patients/clients PaLS staff to suggest this to the Contract Adjudication Group (and record in Pre-tender Minutes) <strong>Completed</strong></td>
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<tr>
<td>Participation as a member of new Pension Board: request DHSSPS Policy team to promote interest from disability groups when appointing Pension Board. <strong>Completed</strong></td>
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<tr>
<td>Pre-tender Minutes</td>
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<tr>
<td>Record of communication to DHSSPS</td>
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<tr>
<td>Assistant Director Procurement and Logistics Service Year 3 onwards</td>
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<tr>
<td>Head of HSC Pension Service Year 3</td>
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<td>13. Explore scope and interest in the establishment of a forum for staff on disability</td>
<td>Better involvement of staff with a disability in decision-making</td>
<td>Options Paper</td>
<td>BSO Equality Unit Year 2 onwards</td>
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<td></td>
<td>Engage with HSC Trusts to establish current practice</td>
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<td>Develop regional approach to complement current structures</td>
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<td>Engage with staff</td>
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<td></td>
<td>Put forum in place and promote to staff</td>
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<tr>
<td><strong>Completed</strong></td>
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<tr>
<td>14. Promote and encourage staff to participate in the disability staff network and support the network in the delivery of its action plan.</td>
<td>Better involvement of staff with a disability in decision-making. Better support for staff with a disability.</td>
<td>Features on intranet.</td>
<td>Senior Management Team Year 4</td>
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<tr>
<td><strong>New action</strong></td>
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<tr>
<td>15. Nominate a champion on disability at senior level</td>
<td>Evidence of leadership at senior level.</td>
<td>Electronic communication evidences champion nomination</td>
<td>Year 1</td>
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<td><strong>16.</strong> Develop a shadowing scheme for Board members and other key public life positions in engagement with the Public Appointments Unit and with people with a disability. Establish a baseline on participation in conversation with Public Appointments Unit.</td>
<td>Develop capacity of people with a disability to participate in public life positions</td>
<td>Shadowing scheme terms of reference. Relevant data collected and reported to ECNI</td>
<td>Year 5</td>
</tr>
<tr>
<td><strong>17.</strong> Involve disabled people in delivery and review of this plan</td>
<td>Better engagement by people with a disability (adults and children where relevant)</td>
<td>Feedback forms from engagement (and roundtable sessions, where appropriate)</td>
<td>BSO Equality Unit Year 5</td>
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## (4) Recruitment and Retention

<table>
<thead>
<tr>
<th>Action Measure</th>
<th>Intended Outcome</th>
<th>Performance Indicator and Target</th>
<th>Timescale and Ownership</th>
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<tbody>
<tr>
<td>18. Offer mentoring opportunities for young adults and older adults with disabilities</td>
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<tr>
<td>• Review best practice</td>
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<td>• Engage with disability organisations</td>
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<td>• Produce guidance</td>
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<td>• Identify mentors</td>
<td>Experience of people with a disability in the workplace is meaningful and any need for additional support is identified at an early stage.</td>
<td>Guidance document Annual Progress Report to ECNI.</td>
<td>BSO Human Resources Year 4</td>
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<tr>
<td>19. Create and promote meaningful placement opportunities including for people with disabilities in line with good practice and making use of voluntary expertise in this area. Produce practical guidance on process and external support available.</td>
<td>People with a disability gain meaningful work experience</td>
<td>Guidance paper. Increased number of placements provided. Placement participants’ feedback from evaluations. Managers’ feedback from evaluations</td>
<td>BSO Equality Unit BSO Human Resources Year 1 onwards</td>
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<tr>
<td></td>
<td>Review best practice <strong>Completed</strong></td>
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<td></td>
<td>Engage with disability organisations <strong>Completed</strong></td>
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<td>Identify placements across all work areas <strong>Completed</strong></td>
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<td>Undertake pilot <strong>Completed</strong></td>
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<td>Evaluate pilot <strong>Completed</strong></td>
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<td>20.</td>
<td>Encourage disabled people to apply for employment opportunities and remain in the workforce (for example attend career fairs, include welcoming statement and issue job adverts to local disability organisations, more flexible working arrangements, review job descriptions, guaranteed shortlisting policy).</td>
<td>Greater numbers of people with a disability apply</td>
<td>Increase in disability marked on equal opportunities monitoring forms and HRPTS</td>
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<td>BSO Human Resources Year 4</td>
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</tbody>
</table>
Signed by:

__________________________  ____________________________
Chair                          Chief Executive
Date:                          Date:

Business Services Organisation
2 Franklin Street
Belfast BT2 8DQ