

EQUALITY SCHEME

NORTHERN HEALTH AND SOCIAL SERVICES COUNCIL

**DRAWN UP IN ACCORDANCE WITH SECTION 75 AND
SCHEDULE 9 OF THE NORTHERN IRELAND ACT 1998**

June 2001

FOREWORD

Section 75 of the Northern Ireland Act 1998 requires public authorities, in carrying out their functions, powers and duties, to have due regard to the need to promote equality of opportunity between persons of different religious belief, political opinion, racial group, age, marital status, sexual orientation, men and women generally, persons with a disability and persons without and persons with dependants and persons without and regard to the desirability of promoting good relations between persons of different religious belief, political opinion or racial group. Public Authorities, as defined by the legislation, are required to send an Equality Scheme to the Equality Commission, showing how they intend to carry out their new duties.

As Chairman and Chief Officer of the Northern Health and Social Services Council (the Council) we are delighted, on behalf of our members and staff to endorse this Equality Scheme which arises out of the implementation of Section 75 of the Northern Ireland Act 1998.

Commitments made in the Equality Scheme refer to how the Council carries out all its functions, powers and duties relating to Northern Ireland. The Council is committed to ensuring that all necessary resources are made available in terms of time, people and money to ensure that the statutory duties are complied with and that the Equality Scheme can be drawn up and implemented effectively and on time.

The Council is committed to the effective promotion of equality of opportunity and good relations in all its policies and practices. This also extends to ensuring that there are effective internal arrangements in place to ensure that the duties are effectively complied with and for monitoring and reviewing of policies. The Council is committed to the development and delivery of a planned programme of communication and training to ensure that all staff are made aware and understand the new equality obligations.

HUGH EWING
Chairman

NOEL GRAHAM
Chief Officer

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1 Introduction

On 1 January 2000 Section 75 of the Northern Ireland Act 1998 placed a new legal obligation on the public sector (state-owned bodies). The new obligation is that by 30 June 2000 all government departments including all non-departmental public bodies, must send an equality scheme to the Equality Commission for approval. This document sets out how we at the Northern Health and Social Services Council propose to meet the new obligation.

2 Our role

- a We were established in 1991 as an independent consumer organisation. We have a duty to represent the public's views and interests, to review the work of health and social services (the services) and to recommend any improvements needed. We are one of four Health and Social Services Councils in Northern Ireland.
- b We have a legal right to:
 - be consulted by the Northern Health and Social Services Board (the board) on any major development in or changes to the services;
 - receive information from the board, about the planning and running of the services; and
 - visit health and social service facilities in the public sector.
- c Our main activities are described below.
 - To represent the public's views when decisions are being made about the services.
 - To influence the board's activities which relate to introducing services.
 - To respond to proposals or plans put forward by the board.
 - To give the public a range of information about the services.
 - To offer support and guidance to patients or members of the public who want to complain about any part of the services.
 - To carry out research into how patients view the services and their experiences of them.
 - To monitor the performance of particular services against the standards set out in their charters.
 - To visit health and social service facilities run by health and social services trusts.
- d We also have a role as an employer of staff and purchaser of goods and services.

3 Our structure

- a We have 24 members who are appointed by the Department of Health, Social Services and Public Safety (DHSSPS). Ten of our members are representatives from the 10 local authorities in our area. These are Antrim, Ballymena, Ballymoney, Carrickfergus, Coleraine, Larne and Newtownabbey Borough Councils, Cookstown, Moyle and Magherafelt District Councils.

The remaining 14 representatives come from voluntary organisations with an interest in the services in our area or are independent people with an interest in health and social care.

Our membership

10 (40%) local authority representatives
7 (30%) voluntary sector representatives
7 (30%) others

- b Representatives, except those from local Councils, are appointed under the Nolan principles. Representatives are usually appointed for four years, but this can be extended to eight years.
- c We have five full-time staff. Our Chief Officer is the senior full-time official.
- d We are funded by the DHSSPS. The board manages the funding for us. We have a total budget of £168,000 (about 39p for each of the 425,000 people living in our area). Any increase in our budget must be negotiated with the DHSSPS.
- e Our offices are in the centre of Ballymena. The building has access for wheelchairs and car parking is available nearby. We encourage people to contact us for advice, information or support on the services. We also have a library of information which organisations, groups or individuals interested in the services can ask for.

4 Our responsibility to the public

- a Every month (except July and August) we hold a public meeting. The meetings are normally held on the first Wednesday of the month in the afternoon. We give the details of coming meetings to local newspapers. Meetings are held throughout our area in places which have access for people with disabilities.
- b If a member of the public wishes to make a contribution an arrangement can normally be made by contacting us before the meeting. We can make arrangements for people with sight or hearing problems if we are asked to do so and given enough notice.

- c By law we must publish and distribute an annual review which gives details of our performance during the previous year. Copies of our annual review are issued to the voluntary and public sectors, and to community organisations. Copies are available from public libraries and can be provided in large print and on audio tape.
- d We must keep to the HSS Executive's Code of Practice on Openness in the HPSS (issued in October 1996). Our members must also keep to the HSS Executive's Code of Conduct for Health and Social Services Council Members (issued December 1996). This code covers matters such as impartiality, financial accountability, confidentiality, discrimination, casual gifts, hospitality and declaring interests. We keep an up-to-date list of our member's interests and the public may inspect this list.
- e We have a procedure for members of the public who may wish to complain about us. Information is provided in our leaflet "How to make a Complaint about the Northern Health and Social Services Council". The Chief Officer is the named person who deals with complaints. The point of contact is listed in 5c.

5 Our obligation under Section 75

- a Under Section 75 of the Northern Ireland Act (the act), when we are carrying out our duties we must promote equal opportunities to all regardless of age, sex, disability, religious belief, political opinion, racial group, age, marital status, dependants or sexual orientation.
- b When carrying out our duties we will also promote good relations between people with different religious beliefs, political opinions or from different racial groups if this seems appropriate. We are committed to the principles of good relations and respect for people of diverse backgrounds, both within the organisation and with our customers.
- c We are committed to meeting our obligation under Section 75 of the act. Our members will be responsible for deciding how we will achieve this. Statutory responsibility for the effective implementation of this scheme lies with the Council and the Chairman. However, Noel Graham (the Chief Officer) will be responsible for introducing arrangements for making sure we meet our obligation and will be accountable to the Council for ensuring that we comply with Section 75 duties. The Chief Officer is also the point of contact for the Equality Commission and for those affected by the duty. The point of contact for this Equality Scheme is

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Chief Officer

Northern Health and Social Services Council
8 Broadway Avenue

Ballymena BT43 7AA

E-Mail: Info@nhssc.n-i.nhs.uk

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Fax: (028) 2565 5112

- d The Council is fully committed to the development and delivery of a planned programme of communication and training on the Equality Scheme to promote Section 75.
- e All staff will be personally responsible for implementing the Equality Scheme within their areas of responsibilities and for providing assurance to the Chief Officer that they are complying with the Section 75 obligations as laid down in the scheme. An organisational chart is included in appendix 1.

6 Arrangements for making sure we meet our obligation

- a In order to make sure we meet our obligation under Section 75 the Chief Officer will keep the members informed of our progress in promoting equal opportunities and maintaining good relations by making our obligation a clear and vital part of our annual programme of work and giving the Council a report every three months. Objectives and targets relating to the statutory obligations will be integrated into the work programme. Progress on meeting the objectives will be reported quarterly to Council.
- b We recognise that the impact of policies can vary depending on the demographics of a particular area, but to provide a fair and consistent approach in Northern Ireland, we and the other three health and social services councils have agreed to set up a Section 75 Scrutiny Committee. This committee will be made up of the chairmen and chief officers of the four health and social services councils and will meet five times a year. It will be a subcommittee of the Executive Committee of the Northern Ireland Association of Health and Social Services Councils. It will be responsible for:
 - making sure that all health and social services councils meet their obligation under Section 75 in a fair and consistent way;
 - developing, sharing and highlighting best practice;
 - reviewing progress in meeting the obligation under Section 75;
 - considering policies which need assessing; and
 - working with the Equality Commission.
- c The chairmen of the health and social services councils will take it in turn to be chairperson and the chief officer of each council will provide a report on the implementation of the scheme at each meeting.
- d We feel that a focus group or consumer panel with membership from the nine groups referred to in the legislation will assist us in the process of screening, impact assessments and consultation.

7 Carrying out our duties

- a When carrying out our duties we must do the following:
- constantly review the work of the services in our area and recommend any improvements that are needed.
 - work with the board to draw up an annual programme of work.
 - give the DHSSPS an annual report on the performance of our work and publicise the report.
 - inspect any premises controlled by trusts except where paragraph 19 (a) and (b) of the regulations apply.
- b For us to carry out our duties the board must do the following:
- comment publicly on our annual review and explain the steps they have taken to deal with issues we raised.
 - make sure they have proper arrangements in place for consulting us on any major development in or changes to the services. Any restrictions to this duty are set out in regulation 17, paragraphs (2) (3) (4).
 - give us any information we may reasonably need to carry out our duties.
 - have a meeting with us at least once a year to discuss areas of interest and concern.
- c For us to carry out our duties the DHSSPS must do the following:
- consult us in the way set out in regulation 17, paragraph (4).
 - ask the board to consult us further if appropriate.
 - act as an arbitrator between the board and us to settle any dispute over the release of information.
- d We follow some of the policies set by external organisations including the DHSSPS, the board and, sometimes, health and personal social service organisations. We will work in partnership with these organisations to monitor and where indicated impact assess all policies and plans to ensure that the statutory obligations under Section 75 have been adhered to.
- e We will assess all policies arising from the way we carry out our duties. The criteria we will assess the policies against are set out in paragraph 9b on page 7. The policies which we will assess in this way are listed in appendix 6. No existing policies have been excluded from this list and as policies are identified or developed they will be added to the list. In any decision with respect to an adopted or proposed policy, account will be taken of any equality impact assessment and consultation carried out in relation to the policy.
- f We will develop a policy for good relations which will be linked to the functions of the Council. This policy will apply equally throughout the organisation and will be included in staff training.

- g In carrying out our work we will manage diversity constructively and productively and will respect and value differences.
- h The promotion of relationships, trust and respect will be fostered so that there is the freedom to discuss issues in a non-threatening manner.

8 Arrangements for assessing our performance

- a Over a three-year period we will assess how each of our policies contributes to the promotion of equal opportunities and good relations. We will do this by following a process known as ‘impact assessment’. Details of the methods we will use are set out in paragraph 11 and 12a on pages 8 & 9. We will keep to the timetable in appendix 5 (as far as is possible) and we will consult at least all of the organisations set out in appendix 2.
- b We will conduct an internal audit to determine the state of relations within the organisation and an external audit of the community to see how the Council is perceived. We will act on the outcome of these audits to introduce policies and procedures to support positive areas and redress deficiencies.
- c The Council will conduct an annual review of progress made in implementing the Scheme and in complying with the statutory duties. This report will be sent to the Equality Commission to assist it in compiling its own Annual Report as required by sub-paragraph 5 (i) (b) of Schedule 8 of the Act. The Council will liaise with the Equality Commission with a view to ensuring progress is maintained.
- d The Council’s Annual Report will contain a report of the Council’s progress in meeting the objectives and targets set, in relation to the statutory duties.
- e All job descriptions for staff will be amended to reflect the importance of and the need for a commitment to equality of opportunity and good relations.
- f We will make our complaint procedure accessible and will investigate all complaints that we have not met our legal obligation and will try to settle the complaint at a local level. Any support required by the complainant to make a complaint will be arranged. Complaints should be directed to Noel Graham, Chief Officer, Northern Health and Social Services Council, 8 Broadway Avenue, Ballymena, BT43 7AA. Telephone (028) 2565 5777. We will acknowledge all complaints within two working days and give a full response within 10 working days in the format preferred by the complainant. Everyone who complains will receive a copy of our complaints procedure and written details of how to bring a complaint to the attention of the Equality Commission and the timescales involved. Details of all complaints will be included in the annual report.

- g We will review our equality scheme within five years of sending it to the Equality Commission. The review will assess our performance in meeting our legal obligation under Section 75 and will include consultation with all the organisations in appendix 2. The review will be sent to the Equality Commission.

9 Assessing our policies

- a We will consider all current and proposed policies to see whether any of them need an impact assessment. Our policies may sometimes be considered by the Eastern, Southern and Western Health and Social Services Councils. This will make sure there is a fair and consistent approach across Northern Ireland. This will be assisted by the focus group/consumer panel specified in 6d.

- b We will consider each policy against the following criteria:

- Is there any evidence of higher or lower use of our services by different groups?
- Is there any evidence that different groups have different needs, experiences, issues and priorities in relation to the policy?
- Could equal opportunities or good relations be promoted more effectively by altering the policy or working with others in government or in the wider community?
- Have consultations with relevant groups, organisations or people indicated that certain policies create problems for them?

If the answer to any of these questions is yes we will consider whether the policy needs to be impact assessed.

- c We will consider policies in the following order:

- Those which target health and social needs.
- Those which promote “social inclusion” (that is, policies which aim to give everyone equal access to services).
- Those which affect people’s lives.
- Those which affect people’s human rights, for example, their dignity, privacy, rights and access to services.

We will review and add to this list.

- d We have not screened out any policies but have decided that all existing policies will require an impact assessment. All written and verbal comments and concerns expressed during the initial consultation period have been taken into account and we will work collaboratively with all other organisations in health and social services to take this process forward.

- e The initial consultation paper will identify the Council's policies and seek views on issues such as whether all policies have been identified, how they affect the relevant groups in terms of equality of opportunity and the priority which should be given to the impact assessments that are considered necessary. The aim of the consultation would be to engage fully with the relevant groups in explaining, discussing and eliciting views. Council will consult those with a legitimate interest in the matter, whether or not they have a direct economic or personal interest.
- f The second stage of the process would involve consultation on the conclusions reached by the Council, taking into account the comments, views and wishes of the representative organisations obtained at the first stage of the process. This paper would set out the Council's conclusions on the equality implications of each policy against the four screening criteria, the rationale for conclusions on policies that we do not propose for impact assessment and an impact assessment timetable.
- g Both consultation stages would require eight weeks consultation periods and four week periods to consider the result of the consultation and prepare further documents.
- h The report submitted to the Equality Commission in June 2001 will include the impact assessment timetable arrived at after consultation and a detailed report of the outcome of the screening exercise will be included in the annual report.

10 Timetable for setting priorities

After consulting on and considering all our policies we will decide which need a full impact assessment. This decision may be made with the other three health and social services councils. Our proposed timetable for carrying out impact assessments is shown in appendix 5. We may change the timetable after consultation or as a result of policy changes brought about by other organisations, for example the board or the DHSSPS.

11 Methods of carrying out impact assessments

In identifying policies which will be subject to equality impact assessment, the Council has considered existing policies, both written and unwritten, and looked forward to new policies which will be proposed during the term of the scheme. We have considered the impact of each policy on equality of opportunity in terms of the nine categories listed in Section 75 of the Act. We will conduct equality impact assessments in accordance with Annex 1 of the Equality Commission's Guide to Statutory Duties. We will also do the following when carrying out impact assessment.

- We will examine the information we currently collect to make sure we have enough accurate information to make decisions. If more data is required we will consult the groups affected by the duty for assistance in this process.

- We will examine any similar information that is available from elsewhere in the UK, the Republic of Ireland or the EC. We will approach other organisations which provide similar services.
- We will consult the organisations listed in appendix 2 and make any relevant documents available in accessible formats.
- We will ask the following questions about each particular policy.
 - Is there direct discrimination?
 - Does the policy have a negative effect on people's rights, resources, access or values?
 - If the policy is not unlawful, is any unfairness justified?
 - Are there equal opportunities?
- We will consider whether any alternative policies are available.
- We will consider how we could justify any negative effect and promote equal opportunities.
- We will state how we intend to monitor negative effects which may arise in the future.
- We will report on the results of all impact assessments.

These steps may alter or be added to over time.

12 Future consultation

- a In consulting on any matter to which this scheme relates, the Council will work with representative groups and individuals of the Section 75 categories in order to identify how best to obtain their views. This may involve face-to-face meetings, advisory groups, surveys, consultative panels, internet discussions and other innovative ways of consulting. There will be different means of consultation for different groups and it will be important to establish the basis for dialogue and engagement during the life of the scheme.
- b In addition to the points listed in Section 15 of this scheme we will ensure that barriers to proper consultation will be removed by ensuring that language is as clear as possible. In addition the scheme and information relating to the scheme will be available on request in large print, in Braille, audio cassette and other languages. Presentations on this scheme, if requested, will be made in an appropriate format to representatives of people with learning disabilities, minority community languages speakers, those whose hearing is impaired, young people and Travellers. The Council will draw on the outcome of a number of conferences to give specific attention to and look for innovative models for engaging young people and people with learning disabilities.

- c We will consult the public, consumer organisations, charities and the voluntary and community sectors on all screening exercises, impact assessments and matters relating to the scheme. This consultation will be timely, open and inclusive and in accordance with the Equality Commission's Guiding Principles. Resources will be made available for individuals and groups to ensure that they can take an active part in any consultation exercises. In addition we will give consideration to time of day, accessibility of venues, use of language and interpreters and need for childcare and transport.
- d A list of those to be included in consultation on matters relevant to the Council's equality duties is listed in appendix 2. This list had been added to since consultation of the Council's draft scheme and is not exhaustive and may be further amended in the light of experience, but will include the Equality Commission, the Community Relations Council, voluntary, community and trade union groups and organisations representing the various categories included in Section 75 and those with a legitimate interest in the matter, whether or not they have a direct economic or personal interest. This approach will apply in respect of consultations on any matters relating to the scheme.
- e We will allow three months for consultation and will begin consultation as early as possible. However, there may be times when this is not possible because the public authority responsible for changing or introducing a policy has restricted its consultation period. The Council will monitor and keep under review such conditions and report on them in its annual review report, which will be provided to the Equality Commission.
- f Information will be made available to ensure meaningful consultation. This will include quantitative and qualitative data which the Council holds or has collated and other documents such as consultants reports.
- g Specific training will be arranged for Council staff engaged in consultation exercises to ensure that those facilitating consultation have the necessary skills to communicate effectively. Training will be developed in consultation with the affected groups.
- h The Council will draw, in particular, on the outcome of the conference organised by OFMDFM on practical issues in carrying out future consultations in the context of Section 75 obligations. This included inputs from representative of groups, which have traditionally been marginalised. It also addressed the special difficulties in consulting children on policy issues in which they have an interest. In developing new approaches in this area, the Council will also draw on advice from the Equality Commission and lessons from other jurisdictions.

- i In organising consultation meetings the Council will aim to ensure full participation taking account of the needs and customs of different groups. In particular, the Council will consider the time of day, the appropriateness of the venue, whether it can be accessed by those with disabilities, how the meeting is run, the use of appropriate language, whether a signer is necessary and the provision of childcare.

13 Monitoring the effect of our policies and publishing negative effects

- a We will put in place a system to ensure that every year we will monitor the effect our policies have on the people Section 75 applies to. The results will be publicised through press releases and in our annual report and in the annual review report which will be sent to the Equality Commission and which will be made available to the public. The published information on equality impact assessments will include:
 - the aims of the policy to which the assessment relates
 - details of any consideration given by the Council to measures which might mitigate any adverse impact of that policy on the promotion of equality of opportunity
 - details of any consideration given by the Council to alternative policies which might better achieve the promotion of equality of opportunity
- b We recognise that the baseline data we collect is currently not accurate enough to begin the process of monitoring. We will take steps to ensure that this data is more robust and consult with relevant groups to assist us in this process.
- c We will tell all the organisations listed in appendix 2 what information we have available. All our information will be available to the public free of charge. Members of the public can ask for information by contacting us at:

Northern Health and Social Services Council
8 Broadway Avenue
Ballymena
County Antrim
BT43 7AA
Phone and Minicom: 028 2565 5777
Fax: 028 2565 5112 or
E-mail: Info@nhssc.n-i.nhs.uk
- d If our monitoring and assessment shows that any one of our policies or services has a greater negative effect on any particular group, or if we could do more to promote equal opportunities, we will make sure that the policy is revised as soon as possible.

- e In some cases an equality impact assessment may identify an anticipated differential adverse impact on particular groups within the Section 75 categories. Assuming that no alternative policy is feasible, steps will be taken, wherever possible, to mitigate such anticipated adverse impact. The Council may in these circumstances commission special monitoring and analysis to confirm the extent of the adverse impact and/or the success of any mitigating measures. Information collected in this special monitoring would be taken into account in any future review of the policy.
- f The Council will make publicly available the outcome of any equality impact assessment and any monitoring undertaken in relation to adverse impacts. The material will be available in printed form and accessible formats in accordance with the Equality Commission's guidelines. In particular we will take steps to ensure that young people and people with learning disabilities are adequately informed. We will also inform the general public about the availability of this material through press releases. We will also place information in specialist publications associated with Section 75 categories.

14 Training

- a The Council has an existing training and development policy which recognises equality of opportunity for all staff.
- b The Council will allocate the necessary resources (in terms of people, time and money) to ensure that the statutory duties are complied with and that its Equality Scheme is drawn up and implemented effectively, and on time. A programme has already been initiated to communicate to, and train staff and members about the requirements of the statutory obligations and how the equality agenda can be actively promoted.
- c The Council will draw up a detailed training plan for all its staff and members over the five year period to which this Scheme refers, which will aim to achieve the following objectives:
 - to raise awareness of current anti-discrimination legislation, including the provisions of Section 75, schedule 9 and Section 76 of the Northern Ireland Act 1998. This will include an explanation of the duties and their implications for all employees;
 - to provide those employees involved in the screening of policies with the necessary skills and knowledge to do this work effectively;
 - to provide those employees involved in the equality impact assessment of policies with the necessary skills and knowledge to do this work effectively;
 - to provide those employees who deal with complaints in relation to the implementation of the Council's Scheme with the necessary skills and knowledge to investigate and monitor complaints effectively;

- to provide those employees involved in the consultation processes with the necessary skills and knowledge to do this work effectively;
 - to provide employees involved in the implementation and monitoring of the effective implementation of the Council's Equality Scheme to do this work effectively;
 - to evaluate the extent to which all participants in this training programme have acquired the necessary skills and knowledge to achieve each of the above objectives.
- d Within one year of the approval of this Scheme, all staff and members will be trained. All new staff and members will be trained on the requirements of Section 75 and this Equality Scheme at induction stage.
- e The Councils will also assess the need for specialised training in communicating with, and understanding the needs of traditionally marginalised groups. Such training would include input from appropriate external specialists.
- f The Council will develop its training plan in consultation with representatives of Section 75 groups and will include input from appropriate external specialists.
- g Copies of this scheme will be available to all our staff and members.

15 Public access to information and services

- a We are committed to communicating with the public in a timely, clear and effective way. We realise that sections of the population do not have equal access to information we provide. For this reason we plan to publish information in other languages, large print and on audio tape. We will monitor access to information and services to ensure equality of opportunity.
- b Information will be made available in consultation with the affected groups, to ensure the highest level of inclusivity in any policy decision making. The accessibility of the language and the format of the information will be considered to ensure that there are no barriers to the consultation process.
- c The Council will assess its arrangement for providing information and will report on proposed changes before they are introduced. The Council will consult with representative groups as it carries out this assessment and will consult on the findings and recommendation of the assessment prior to implementation.
- d The Council has given consideration to how best to communicate information to young people and those with learning disabilities and will use methods that are appropriate.

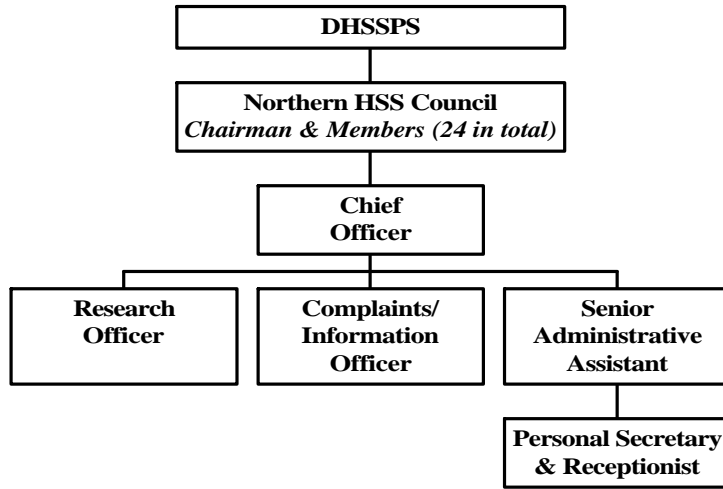
- e The Council considers it particularly important that sufficient timely and appropriate information is provided to enable all affected groups and individuals to consider the full implications of proposals, and it will take steps to ensure this.
- f When we give information to the local and regional press we will make sure that our press statements, articles and advertisements continue to be made available to newspapers and journals. We will also target specific publications for the people Section 75 applies to.
- g Our offices are open to the public each day from 9.30am to 4.30pm Monday to Friday. We keep to all relevant parts of the Disability Discrimination Act 1995. (See paragraph 3.e for access details.)

16 Publishing our equality scheme

- a We will make sure our equality scheme is widely publicised in a way which will give everyone access to it.
- b The final scheme will include the list of suggestions sent by organisations. This will provide a mechanism for ensuring that all suggestions have been included.
- c The equality scheme will be made available, free of charge, on request, to any group, organisation or person. We will provide different formats including the following:
 - audio tape;
 - e-mail;
 - large print;
 - other languages;
 - disk; and
 - braille.
- d Specific consideration and assistance from groups, who have the required expertise will be obtained to ensure that we communicate with children and people with a learning disability.
- e We will advertise the availability of the scheme in local newspapers and distribute it to the groups representing the categories in Section 75. It will also be made available to staff and members and all those listed in appendix 2.

Appendix 1

**Organisational Chart
Northern Health and Social Services Council**



Appendix 2

Distribution/Consultation List

Accord
Action Cancer
Action MS
Action Mental Health
ADOPT
Age Concern
Aids Helpline Northern Ireland
Alcoholics Anonymous
Alliance Youthworks
Alzheimer's Society Northern Ireland
Amputees Association of Northern Ireland
Antrim Borough Council
Antrim Citizens Advice Bureaux
Antrim/Ballymena Commissioning Pilot
Arthritis Care
ASBAH
Association of Chief Officers of Voluntary Organisations
Asthma Society
Aware - Defeat Depression
Ballycastle Community Association
Ballyclare Secondary School
Ballymena Borough Council
Ballymena Community Forum
Ballymoney Borough Council
Ballymoney Community Association
Ballymoney Disability Development Programme
Ballymoney Youth Outreach Trust
Ballynure and District Community
Barnardos
Belfast Central Mission
Blind Centre (Northern Ireland)
BRIDGE
British Deaf Association
British Epilepsy Association
British Sport Association for the Disabled (BSAD)
Bryson House the Charity
Bushmills and District Community Association
Cancer Relief (Macmillan Fund)
Carafriend
Care Christian Action Research and Education for NI
Carers National Association
Carrickfergus Borough Council

Catholic Family Care Society Northern Ireland
CAUSE for Mental Health
Causeway HSS Trust
Chest, Heart & Stroke Association
Child Accident Prevention Trust
Child Care (Northern Ireland)
Child Poverty Action Group (Northern Ireland)
Childhood Fund Support Service
Children's Law Centre
Chinese Welfare Association
Church of Ireland Board of Responsibility
Cloughmills Community Development Association
Coalition on Sexual Orientation
Coleraine Borough Council
Coleraine Visually Impaired Club
Committee for Employment of Disabled Persons
Committee on the Administration of Justice
Community Development and Health Network
Community Relations Council
Community Relations Training/Learning Consortium
Cookstown District Council
Council for Catholic Maintained Schools
Council for the Homeless (Northern Ireland)
CRUSE
Cushendall District Development Group
Cushendun and District Development Association
Cystic Fibrosis Trust
Department of Health, Social Services and Public Safety
Dervock and District Community
Diabetes UK
Diocese of Down and Connor
Disability Action
Downs Syndrome Association (Northern Ireland)
Dr Ian R K Paisley MP
Dr Sean Farren, MLA
Employer's Forum on Disability
Equality Commission for Northern Ireland
Equality Forum for Northern Ireland
Extern
Extra Care for Elderly People
Family Planning Association Northern Ireland
First Key (Northern Ireland)
Focus on Family
Foyle Friend
Garvagh and District Community Association
Garvagh & District Development Association

Gay and Lesbian Youth Northern Ireland
Gingerbread (Northern Ireland)
Glenariff Development Group
Glenullin Agivey Development Group
Guide Dogs for the Blind Association
Help the Aged
Home Mission Society
Homefirst Community Trust
Home-Start UK
Huntington's Disease Association
Include Youth
Indian Community Centre
LACUNA
Larne Borough Council
Larne Community Care Centre
Larne Community Development Group
Lesbian Line
Lifestart
Magherafelt District Council
Marie Curie Cancer Centre
ME Association
MENCAP in Northern Ireland
Mental Health Commission for Northern Ireland
Methodist Church in Ireland
Mid-Ulster Commissioning Pilot
Mid-Ulster Women's Network
Mosside and District Community Association
Motor Neurone Disease Association
Moyle District Council
Mr Brendan McAteer
Mr Roy Beggs MP
Mr William Ross MP
Mr Martin McGuinness MP
Mr Donovan McClelland MLA
Mr Denis Haughey MLA
Mr Francie Molloy MLA
Mr John Kelly MLA
Mr Roy Beggs (Junior) MLA
Mr Sean Neeson MLA
Mr David W Hilditch MLA
Mr Ken Robinson MLA
Mr Danny O'Connor MLA
Mr Ian Paisley (Junior) MLA
Mr Gardner Kane MLA
Mr James Leslie MLA
Mr Jim Wilson MLA

Mr Wilson Clyde MLA
Mr Norman Boyd MLA
Mrs Pauline Armitage MLA
Ms B Kelly
Ms Catherine Robertson
Ms Karen McKeague
Multi-Cultural Resource Centre
Multiple Sclerosis Society
Muscular Dystrophy Group of GB and Northern Ireland
National Childbirth Trust
National Deaf Children's Society
National Schizophrenia Fellowship
Newtownabbey Borough Council
Newtownabbey Community Development Agency
Newtownabbey Community Project
Newtownabbey Senior Citizen's Forum
NIACRO
NICOD
NICVA
NIGRA (Northern Ireland Gay Rights Association)
North Antrim Community Network
North Eastern Education & Library Board
Northern Health and Social Services Board
Northern Ireland African Cultural Centre
Northern Ireland Ambulance Service Trust
Northern Ireland Anti-Poverty Network
Northern Ireland Association of Citizens Advice Bureaux
Northern Ireland Association for Mental Health
Northern Ireland Childminding Association
Northern Ireland Committee Irish Congress of Trade Unions
Northern Ireland Council on Alcohol
Northern Ireland Council for Ethnic Minorities
Northern Ireland Council for Integrated Education
Northern Ireland Foster Care Association
Northern Ireland Guardian Ad Litem Agency
Northern Ireland Human Rights Commission
Northern Ireland Statistics and Research Agency
Northern Ireland Public Service Alliance
Northern Ireland Voluntary Trust
Northern Ireland Women's Aid Federation
Northern Ireland Women's European Platform (NIWEP)
Northern Ireland Youth Forum
Northern Local Medical Committee
NSPCC
NUS USI Northern Ireland Student Centre
Oakleaf Community Network

PAPA
Parents Advice Centre
Parents and Friends of Muckamore Abbey
PHAB (Physical Handicapped and Able-Bodied)
PLAYBOARD
PRAXIS (Mental Health)
Press for Change
PROSPECTS
Putting Children First
Queer Space
Rainbow Project
Rathlin Island Community Association
RELATE
Remember Our Child
RESPOND
Rev William McCrea MP
Rev Robert Coulter MLA
RNID
Royal National Institute for the Blind (RNIB)
Rural Community Network
Rural Health and Social Well Being
Save the Children Fund
SENSE
Simon Community Northern Ireland
Society of St Vincent de Paul
South East Antrim Locality Total Purchasing Pilot
Speechmatters
Talking Newspaper Association
The Cedar Foundation
The Equality Unit
The Industrial Society
The Local Government Staff Commission for Northern Ireland
The Presbyterian Church in Ireland Board of Social Witness
The Salvation Army
Threshold
Travellers Movement (Northern Ireland)
Treetops
Ulster Cancer Foundation
UNISON
United Hospitals HSS Trust
United Response
University of Ulster, Coleraine
Voice of Young People in Care
Volunteer Development Agency
WAVE
West Belfast Economic Forum

Windyhall Community Development Association
Women's Forum Northern Ireland
Women's Information Group
Women's Resource and Development Agency (WRDA)
Young Parents Network
Youth Action (Northern Ireland)
Youth Council for Northern Ireland

Additions/changes will be made to this list.

SEMINAR FEEDBACK

Seminar and group discussion participants

Armagh and Dungannon Health and Social Services Trust
Arthritis/Rheumatism Campaign
Carers National Association
Causeway Volunteer Bureau
Central Council for Education and Training in Social Work
Chest, Heart and Stroke Association
Community Development and Health Network
Craigavon Area Hospital Group Trust
Department of Health, Social Services and Public Safety
Derry Travellers Support Group
Disability Action, Community Development Training
Disability Discrimination Project
Dungannon Health and Social Services Community Forum
Eastern Health and Social Services Board
Equality Commission
Extra Care
Myalgic Encephalomyelitis Association
Newry and Mourne Mental Health Forum Insight User Group
Newry and Mourne Women
Northern Ireland Assembly
Northern Ireland Association for the Care and Resettlement of Offenders
Northern Ireland Association of Mental Health (NIAMH)
Northern Ireland Housing Executive
Northern Ireland Pre Playgroup Association
Northern Ireland Voluntary Trust
Physically Handicapped and Able Bodied
Portadown Carers National Association
Rural Mental Health Project South Armagh
Senior Citizen's Consortium
Sense (The National Deafblind and Rubella Association)
Southern Education and Library Board
Sperrin Lakeland Trust
The Orchard Centre
Training Organisation for Personal Social Services
Wave Trauma Centre

Feedback from seminar participants

- plain English should be used;
- graphics should be included to make the contents attractive and visual;

- different formats should be available for groups of people such as visual impairment and learning disability;
- a two-tier approach should be used, that is, the full scheme and a simple A5 size, 4 side guide;
- where possible, simple examples should be included to explain technical points;

Quotation - “when a mother collects child benefit in the post office she wants to know her entitlement not the Act, Chapter and Section!”

- action will speak louder than words, that is, evidence of mainstreaming in HSSC business will be looked for by people who will never read a scheme;
- a similar approach should be taken to the slogan “NHSSC is an equal opportunity employer”, that is, a logo could be used on stationery, for example, “NHSSC supports the right of equality of every person”;
- the equality details should be introduced on a layered basis;
- there is a need to raise public awareness;
- the public through representative groups needs to take ownership of the legislation;
- the responsibilities of employers should be offset by the rights of the public;
- awareness can be enhanced if the legal jargon is removed;

Quotation - “the scheme is far too much to swallow at one go”;

- take the message into communities via a roadshow;
- groups/communities should be empowered through being given an understanding of equality issues;
- a review process (post 30 June 2000) should look at the effects of the scheme;
- an opportunity should be reserved to amend sections of the scheme in the light of experience;
- templates should be available to groups with a health and social care interest to consider the contents of related schemes.
- Languages - Has the draft been plain English approved? Have HSSCs been proactive producing in other languages/formats rather than ‘on request’.
- Good Relations - reference is made. What does it mean to say HSSCs? How are they going to promote? Include a statement of intention.

- Top Level Commitment - There is a signed statement by Chair/Chief Officer.
- Training of staff and members vague. How and who will do this? Training must become part of the culture of HSSCs. Too much current emphasis on training as to what constitutes an Equality Scheme. Training on good relations needed.
- Screening Process - Reference vague. How will it be done? What consultation will take place etc? Need to be developed within the document.
- Membership - Is there equality among membership? How will HSSC promote and encourage this?
- Awareness - How aware are the public of HSSCs and their role? How aware is HSSC of its public/its profile/representative groups/data on each of the principles of section 75. Is the name a problem? What action will HSSCs take?
- Accessibility - How accessible are HSSCs to the public? What are the barriers, for example, language, sign etc, to consultation? How can the Councils effectively communicate with ethnic minorities and young people? How do they propose to address the difficulties?
- Document should have headings in bold; font size bigger (16 font), information on background and printed on yellow paper.
- Short on how to manage the impact - how Council is going to do it?
- Recording of information for monitoring - difficulties gathering sensitive information.
- Specify name of Council and membership.
- Encourage attendance at Council meetings.
- Issue of children needs higher profile in Council's work.
- Powers debated a bit more.
- Needs to promote identity a little more.
- Welcomed Council's initiative. Model to think about and thought other public bodies should do something similar. Would "need 10 similar sessions".
- Too much information for community/voluntary groups to take in.
- Do not know how to respond but agreed that it was important to respond.
- In some instances have not been given the statutory two months' time to respond.
- Not aware of grants being provided by Equality Commission. Those who were aware say timescale too short for training, therefore not interested.

- Consultation process and timescales unsatisfactory from everyone's point of view, that is, community/voluntary/statutory organisation.
- Everyone agreed that mainstreaming equality into an organisation's culture was important. Everyone's responsibility, not just one person's job.
- In relation to monitoring, want people on the ground to be involved.
- Should law and guidance be revised to include good relations between all groups listed in 5.1 and 5.2?
- Disability definition needs to be enlarged to include all disabilities and to include mental illness.
- Agreed to Council's suggested priorities for screening.
- Want to be informed if organisation is taking responses on board.

WRITTEN RESPONSES TO NHSSC DRAFT SCHEME

ORGANISATIONS WHO RESPONDED TO DRAFT EQUALITY SCHEME, ISSUES RAISED AND NHSSC COMMENTS

Action Mental Health

Age Sector Reference Group on behalf of

Age Concern Northern Ireland

Association of Retired & Persons over 50

Castlereagh Lifestyle Consortium

Forever Young, Coleraine,

Help the Aged Northern Ireland

Newtownabbey Senior Citizens' Forum

Newry and Mourne Senior Citizens' Consortium

North Belfast Senior Citizens' Forum

Northern Ireland Pensioners' Convention

Northern Ireland Public Service Alliance Retired Members Association

Older Women's Network

Senior Network Northern Ireland

Sperrin and Lakeland Senior Citizens' Consortium and

West Belfast Senior Citizens' Forum

Antrim Borough Council

Association of Chief Officers of Voluntary Organisations (NI)

Ballymena Borough Council

British Deaf Association

Coalition on Sexual Orientation on behalf of

Foyle Friend

Cara friend

Gay and Lesbian Youth NI

Lesbian Line

Northern Ireland Gay Rights Association

Queer Space

Butterfly Club

Foyle LGB Line

The Rainbow Project

LGB Branch of National Union of Students/Union of Students of Ireland

Committee on the Administration of Justice

Community Development and Health Network

Community Relations Council

Community Relations Training Learning Consortium

Council for the Homeless (NI)

Disability Action

Down's Syndrome Association

Employers' Forum on Disability

Equality Commission for NI

Equality Forum NI

First Key (NI)

Homefirst Community Trust
 Mental Health Commission
 Multi-Cultural Resource Centre
 National Schizophrenia Fellowship NI
 North Eastern Education and Library Board
 Northern Health and Social Services Board
 Northern Ireland Association for the Care and Resettlement of Offenders
 Northern Ireland Council for Ethnic Minorities representing 23 black and ethnic minority
 voluntary and community sector organisations
 Northern Ireland Pre-School Playgroups Association
 Northern Ireland Voluntary Trust
 Northern Ireland Women's Aid Federation Rural Community Network (NI)
 Press for Change
 Rural Community Network (NI)
 Simon Community
 Speechmatters
 The Blind Centre for NI
 The Royal National Institute for Deaf People
 UNISON
 United Hospitals Trust
 West Belfast Economic Forum
 Women's Forum NI
 Women's Resource and Development Agency
 Youth Council for NI

Action Mental Health	
<ul style="list-style-type: none"> large number of schemes received; unable to respond within timescales 	- Noted
Age Sector Reference Group	
<ul style="list-style-type: none"> it is unclear whether there are other Council policies that are not listed for screening 	- The full list of policies included in Stage II consultation
<ul style="list-style-type: none"> ensure training includes attitudinal elements of legislation e.g. Ageism 	- Agreed
<ul style="list-style-type: none"> commitment to consult when screening policies not explicit 	- Commitment given
<ul style="list-style-type: none"> queries whether paragraph 12 is a process or methodology 	- Paragraph 12 amended and enhanced
<ul style="list-style-type: none"> timescale for screening procedure needed 	- Working with other health and social services bodies on this
<ul style="list-style-type: none"> note disparity in funding between four councils and fails to see how equality of service can exist under these circumstances 	- Agreed and raised with Director of Finance DHSSPS
four Councils to consider establishing a focus group with membership from the 9 groups in the legislation relating to the Scrutiny Committee	- Joint action between HSSCs
<ul style="list-style-type: none"> consider meetings in community/voluntary organisation premises 	- Being implemented

<ul style="list-style-type: none"> no statement on commitment to ‘the allocation of necessary resources’ 	- Scheme amended to include this
<u>Antrim Borough Council</u>	
<ul style="list-style-type: none"> draft noted; no adverse comment to make 	- Noted
<u>Association of Chief Officers of Voluntary Organisations (NI)</u>	
<ul style="list-style-type: none"> scheme made available to 89 members 	- These comments are noted
<ul style="list-style-type: none"> efforts commended 	- These comments are noted
<ul style="list-style-type: none"> assistance offered 	- These comments are noted
<ul style="list-style-type: none"> asked to ensure voluntary sector managers are not excluded in recruitment 	- These comments are noted
<u>Ballymena Borough Council</u>	
<ul style="list-style-type: none"> similar formats used 	- Comments noted
<ul style="list-style-type: none"> consultation process will assume greater significance as the process evolves 	- Comments noted
<u>British Deaf Association</u>	
<ul style="list-style-type: none"> stress importance of appropriate consultation to ensure the inclusion of deaf people 	- Agreed
<ul style="list-style-type: none"> consider user forums when screening policies 	- Noted for consideration
<u>Coalition on Sexual Orientation</u>	
<ul style="list-style-type: none"> ‘necessary resources’ need clarified 	- Will become clearer in due course
<ul style="list-style-type: none"> adequate consultation time must be allowed at each stage 	- This has been raised in several instances and will be taken on board
<ul style="list-style-type: none"> screening should take place after scheme approved 	- Noted
<ul style="list-style-type: none"> impact assessment should also cover equal opportunities and health and safety policies 	- Agreed
<ul style="list-style-type: none"> sexual orientation should be included in impact assessment 	- Agreed
<ul style="list-style-type: none"> LGBT press should be used to communicate and publicise meetings and information placed with relevant community groups 	- This request to be considered
<ul style="list-style-type: none"> there should be no charge for documentation 	- No charge will be made
<ul style="list-style-type: none"> authorities should work closely with CoSo on impact assessment results 	- Agreed
<ul style="list-style-type: none"> CoSo should be involved in training for <u>all</u> staff 	- Training programme to be developed
<ul style="list-style-type: none"> representative groups should be able to make complaints on behalf of individuals 	- Noted
<u>Committee on the Administration of Justice (CAJ)</u>	
<ul style="list-style-type: none"> scheme does not detail how the Council has decided that the obligations will be met 	- The scheme has been revised and updated
<ul style="list-style-type: none"> no detail on necessary administrative arrangements 	- The scheme has been enhanced to include this
<ul style="list-style-type: none"> would like to see a commitment to build in the requirements into Council’s strategic and operational 	- This commitment now given

planning processes	
<ul style="list-style-type: none"> • Council's monitoring role would not be carried out if abrogates responsibility for policies initiated by another public body 	- Scheme amended to reflect this
<ul style="list-style-type: none"> • list of policies does not indicate if others have been omitted 	- It is not the intention to omit any policies
<ul style="list-style-type: none"> • training not put in the context of a wider training and development programme 	- Training programme to be developed
<ul style="list-style-type: none"> • would welcome more detail on specifically how the Council would intend to consult 	- The scheme has been amended accordingly
<ul style="list-style-type: none"> • need more detailed consideration of how the Council will extend its monitoring arrangements 	- Paragraph 12 enhanced
<u>Community Relations Council</u>	
<ul style="list-style-type: none"> • the development of the scheme and its ultimate adoption is only the start of the process of mainstreaming equality and good relations across the sector 	- Agreed
<ul style="list-style-type: none"> • copy of 'Guidelines for a Community Relations Strategy' enclosed 	- Received for consideration
<u>Community Relations Training Learning Consortium</u>	
<ul style="list-style-type: none"> • a change is required on organisational cultures, which have been based on avoidance and silence 	- This is recognised
<ul style="list-style-type: none"> • CRTLC can provide support in the practical application of a scheme, particularly around training for the furtherance of good relations for all staff 	- Noted for training programme
<ul style="list-style-type: none"> • performance indicators should be built into management systems and practices 	- This will be considered
<ul style="list-style-type: none"> • all staff should have access to the equality scheme and all related policies 	- This is a small organisation and all staff have this access
<u>Community Development and Health Network (NI)</u>	
<ul style="list-style-type: none"> • raised a number of general issues which would form discussion with Network members at a June meeting 	- Noted
<u>Council for the Homeless (NI)</u>	
<ul style="list-style-type: none"> • factors enshrined in equality legislation may not be applied to 'homeless people' 	- Comment noted
<ul style="list-style-type: none"> • the spirit of the legislation should be central to the impact assessments and policy development 	- Agreed
<ul style="list-style-type: none"> • setting the equality scheme alongside other relevant legislation and policy initiatives is imperative 	- Agreed
<u>Disability Action</u>	
<ul style="list-style-type: none"> • disabled people have other dimensions to their lives 	- Noted
<ul style="list-style-type: none"> • needs commitment to the allocation of the necessary resources 	- This commitment given
<ul style="list-style-type: none"> • policies determined by other external organisations should be included in the screening process to ensure not abdicated 	- Scheme amended to reflect this
<ul style="list-style-type: none"> • demographics will dictate different priorities, therefore will be necessary to carry out 	- The health and social services sector looking at this

independent impact assessments	
<ul style="list-style-type: none"> • suggest a three year period to assess policies 	- HSSCs proposed 3 year period
<ul style="list-style-type: none"> • include contact person for complaints 	- Included
<ul style="list-style-type: none"> • complaints procedure must be accessible and provide necessary support to complainant 	- This is now included
<ul style="list-style-type: none"> • scheme to be available in a range of formats 	- Agreed and committed to this
<ul style="list-style-type: none"> • how and when will consultation on the screening exercise take place? 	- Stage II process underway
<ul style="list-style-type: none"> • policies list should include procurement of goods and services and human resources 	- Wider policy impact recognised
<ul style="list-style-type: none"> • more information on training required 	- To be developed with local Board and Trusts
<ul style="list-style-type: none"> • list of available formats for information should include website and be widely disseminated through specialist publications of affected groups 	- Noted these are being considered
<ul style="list-style-type: none"> • how will access to information and services be monitored to ensure equality of opportunity? 	- This issue recognised and similar approach to be considered by HSSCs
<u>Down's Syndrome Association</u>	
<ul style="list-style-type: none"> • it would be beneficial to see some targets set for the levels of consultation to be achieved 	- Noted
<ul style="list-style-type: none"> • a benefit has been the description of the work of each public body 	- Noted
<ul style="list-style-type: none"> • the public should be informed of what policies are not to be subject to further impact assessment 	- Agreed, the screening process to look at priorities
<ul style="list-style-type: none"> • equality should be an intrinsic part of services therefore funds should not be diverted from other services 	- This is recognised and is a difficulty for small organisations
<ul style="list-style-type: none"> • it is sensible for organisations in broadly similar areas of work to develop similar policies 	- Joint approach taken by HSSCs
<ul style="list-style-type: none"> • voluntary sector has a strong role in specific training to organisations 	- Agreed training to be developed
<ul style="list-style-type: none"> • stress that people with disabilities are represented across all the groups in section 75 	- Noted
<u>Employer's Forum on Disability</u>	
<ul style="list-style-type: none"> • significant efforts have been made to develop plans which will ensure the views and needs of people with disabilities are taken into consideration 	- Comment noted
<ul style="list-style-type: none"> • look forward to receiving your policy impact assessments 	- Will be included in future consultation
<u>Equality Commission for NI</u>	
<ul style="list-style-type: none"> • 28 points in relation to the draft scheme to be addressed 	- These noted and amendments made in consultation with Equality Commission staff
<u>Equality Forum NI</u>	
<ul style="list-style-type: none"> • refers to criteria set out in the Guidelines in regard to functions and policies, consultative processes, screening process, impact assessments and allocation of resources 	- Noted

<u>First Key (NI)</u>	
<ul style="list-style-type: none"> stress the need to consider young people leaving care (16-21 years) 	- Noted and agreed
<ul style="list-style-type: none"> need to make suitable arrangements to consult young people 	- Agreed and scheme amended to reflect this
<ul style="list-style-type: none"> expressed interest in policies/statement which relate to young people leaving care 	- No specific policies in this contest within HSSCs
<u>Homefirst Community Trust</u>	
<ul style="list-style-type: none"> there may be a need for a co-ordinated approach on some of the policies in use within the service 	- Agreed
<u>Mental Health Commission for NI</u>	
<ul style="list-style-type: none"> not possible to comment on drafts due to organisation size and resources 	- Noted
<u>Multi-Cultural Resource Centre</u>	
<ul style="list-style-type: none"> emphasise the need for adequate and sustained core funding 	- Agreed
<ul style="list-style-type: none"> service users require training, support and facilitation in order to make an effective contribution 	- Acknowledged to be addressed by HSSPS organisations
<ul style="list-style-type: none"> schemes and policies must reflect concerns and issues for minority ethnic communities and lead to action 	- Acknowledged and agreed
<ul style="list-style-type: none"> consultation must specifically include minority ethnic groups and individuals (good practice examples given) 	- Agreed
<ul style="list-style-type: none"> include policies on procurement of services, employment, recruitment and implementing health and social services 	- Wider implications recognised by HSSPS organisations
<ul style="list-style-type: none"> 'due regard' must be paid to equality of opportunity for minority ethnic communities 	- Agreed
<ul style="list-style-type: none"> the equality scheme should include specific timescales 	- These will be developed
<ul style="list-style-type: none"> there needs to be an identification of clear management structures for the equality duty 	- Scheme amended to make this clear
<ul style="list-style-type: none"> ethnic monitoring should be included in data collection 	- Agreed
<u>National Schizophrenia Fellowship NI</u>	
<ul style="list-style-type: none"> scheme to be written in simple language 	- The draft scheme reflected this
<ul style="list-style-type: none"> carers and their roles should be included in draft schemes 	- Carers and their roles are recognised
<u>North Eastern Education and Library Board</u>	
<ul style="list-style-type: none"> impact of scheme will come through implementation process 	- Supported and noted
<ul style="list-style-type: none"> offer of assistance on equality issues 	- Joint working and sharing of information will be beneficial
<u>Northern Health and Social Services Board</u>	
<ul style="list-style-type: none"> content positive and balanced 	- Noted
<ul style="list-style-type: none"> will continue to work closely with NHSSC 	- Joint partnership arrangement in progress
<u>Northern Ireland Association for the Care and Resettlement of Offenders</u>	

<ul style="list-style-type: none"> the Act fails to promote equality of opportunity to people with criminal convictions 	- Noted
<ul style="list-style-type: none"> access to particular public services should be available to all ex-offenders unless it can be argued that there is risk involved 	- Agreed
<ul style="list-style-type: none"> the consequences of 75% of children leaving custodial care without educational qualifications results in severe restriction on future opportunity 	- Acknowledged
<ul style="list-style-type: none"> there is over representation of certain categories of children in the juvenile justice system 	- Much work needed on information databases
<ul style="list-style-type: none"> one-third of children held in custody have physical or learning disabilities and are housed in facilities inappropriate for their needs 	- Databases need developing
<u>Northern Ireland Council for Ethnic Minorities</u>	
<ul style="list-style-type: none"> needs reference to organisational structure and accountability to the public to meet statutory duties 	- The scheme has been enhanced to include this
<ul style="list-style-type: none"> staff performance review and targets and objectives not included 	- This area requires development
<ul style="list-style-type: none"> all Councils need reference to 75 Scrutiny Committee 	- A joint initiative and is reflected in the scheme
<ul style="list-style-type: none"> complaints system needs to be accessible to those without English and those with disabilities 	- Recognised and supported
<ul style="list-style-type: none"> need to consult on screening exercise 	- This will be carried out
<ul style="list-style-type: none"> commitment to consider various data forms 	- Scheme amended
<ul style="list-style-type: none"> ethnic monitoring should be included to monitor adverse impact 	- Requires development of monitoring systems
<ul style="list-style-type: none"> training must also include anti-racism and anti-prejudice training for all staff 	- Agreed
<ul style="list-style-type: none"> need to consider how to monitor access to services 	- Requires development of monitoring systems
<ul style="list-style-type: none"> race equality audit enclosed 	- Noted
<u>Northern Ireland Pre-School Playgroups Association</u>	
<ul style="list-style-type: none"> Clear outline of NHSSC role and function 	- Noted
<ul style="list-style-type: none"> List of policies for screening not subject to consultation 	- All policies subject to consultation
<ul style="list-style-type: none"> Impact assessment consultation and methodology commended 	- Noted
<ul style="list-style-type: none"> Separate monitoring of equality complaints needed 	- This will be carried out. Scheme amended accordingly
<u>Northern Ireland Voluntary Trust</u>	
<ul style="list-style-type: none"> crucial to develop baselines and indicators to enable monitoring to be effective 	- Agreed
<ul style="list-style-type: none"> make more effort to be seen as independent and on the side of the public rather than part of the system 	- Noted and agreed
<ul style="list-style-type: none"> name change needed 	- Agreed. Requires legislation
<ul style="list-style-type: none"> Chair of the Council and Chief Executive signatures required 	- Both included
<ul style="list-style-type: none"> the remit of the joint Scrutiny Committee should be 	- To be developed in

included	conjunction with other 3 HSSCs
• Councils should have ‘powers’ as a watchdog body	- Agreed
• consideration should be given to overcoming cultural and institutional barriers to consultation	- This is recognised and being addressed
• screening should be an open and transparent process	- Agreed
• timetable for the work and training should be included	- This is being further developed
• clear information on complaints and how they will be dealt with	- Scheme amended to include this
• 5 year review too long	- Impact assessment based over 3 years
<u>Northern Ireland Women’s Aid Federation</u>	
• Social exclusion experienced by women and children who have experienced violence or abuse in the home must be recognised by public bodies	- Agreed and supported
• Can assist in awareness raising training for staff	- Noted for development of the training programme
<u>Press for Change</u>	
• welcome the opportunity to be included in the consideration of sexual orientation matters	- Noted
• legislation and policy should include transgender and transsexual people	- Agreed
• the Council must take the opportunity to work with Trans organisations	- This is recognised and agreed
<u>Rural Community Network (NI)</u>	
• ‘rural proofing’ is essential so that the scheme is sensitive to the needs of community which it serves	- This is noted
• consultation should be taken to a wide range of venues and times with groups by means of seminars, focus groups and collective debate and discussion	- Limitation of current consultation process recognised and being addressed jointly by HSSPS organisations
<u>Simon Community</u>	
• factors enshrined in equality legislation may not be applied to ‘homeless people’	- Comments noted
• the spirit of the legislation should be central to the impact assessments and policy development	- Agreed
• setting the equality scheme alongside other relevant legislation and policy initiatives is imperative	- Agreed
<u>Speechmatters</u>	
• information should be presented in a way that ensures it is linguistically appropriate (examples given)	- Supported
• communicators need specialist training to communicate effectively with aphasic adults	- Agreed
• an experienced facilitator should be available to advocate on behalf of aphasic people	- Joint approach required to develop this
<u>The Blind Centre for NI</u>	
• should specify commitment to internal arrangements	- Scheme amended to reflect

to monitor and review planned programme of communication and training, resources in terms of people, time and finance	this
<ul style="list-style-type: none"> • impact assessment should include employment and procurement duties 	- Wider implications recognised by HSSPS organisations
<ul style="list-style-type: none"> • scheme should include a point of contact, clear lines and designation of responsibility, structural changes, objectives and targets, staff performance review, monitoring and reporting systems 	- Scheme enhanced. Some areas of development required
<ul style="list-style-type: none"> • Council must recognise information needs of different groups in accessible formats and include consultation skills in staff training with an appropriate timetable 	- Recognised and agreed
<ul style="list-style-type: none"> • should be a commitment to monitoring access to information and services 	- Scheme amended. Monitoring systems require development.
<u>The Royal National Institute for Deaf People (RNID)</u>	
<ul style="list-style-type: none"> • policies must address the needs of deaf and hard of hearing people particularly in terms of environments, staff training and communications equipment 	- Recognised and agreed
<u>UNISON</u>	
<ul style="list-style-type: none"> • Reference to required format for the statement of introduction 	- Scheme amended
<ul style="list-style-type: none"> • Consultation process must be proactive 	- Agreed
<ul style="list-style-type: none"> • Information on functions, powers and duties in simple accessible language 	- Noted
<ul style="list-style-type: none"> • Scheme to include procurement and employment 	- Recognised by HSSPS organisations
<ul style="list-style-type: none"> • Necessary resources to be committed 	- Three year period proposed
<ul style="list-style-type: none"> • Time period for impact assessments not acceptable 	- Agreed
<ul style="list-style-type: none"> • All policies to be screened 	- Agreed
<ul style="list-style-type: none"> • Must not exclude individuals or groups from stakeholders meetings 	- Agreed
<ul style="list-style-type: none"> • Impact assessment and consultation must comply with Commission guidelines 	- Agreed
<ul style="list-style-type: none"> • Consultation must be comprehensive and innovative 	- Supported. Council will develop with other HSS bodies
<ul style="list-style-type: none"> • More detail needed on staff training 	- This area requires development with local Boards and Trusts
<u>United Hospitals Trust</u>	
<ul style="list-style-type: none"> • acknowledges consideration which went into scheme preparation and note similarities and variances in approaches 	- Noted
<u>West Belfast Economic Forum</u>	
<ul style="list-style-type: none"> • schemes must be available in Irish and other formats/languages 	- Other languages/formats proposed within the revised scheme
<ul style="list-style-type: none"> • assessment must be conducted on employment policies and procurement of services 	- Recognised within HSSPS organisations

<ul style="list-style-type: none"> document must be written in clear and accessible language 	- Agreed
<ul style="list-style-type: none"> management responsibility and contact person must be named and the onus on this person to ensure appropriate resources and effective implementation procedures in place 	- Scheme now reflects this
<ul style="list-style-type: none"> staff performance and appraisals should include equality scheme implementation and sanctions identified 	- This area requires development
<ul style="list-style-type: none"> employees to disclose membership of oath-bound organisations 	- This is noted
<ul style="list-style-type: none"> assessment criteria must be applied to all policies and the results publicised 	- Agreed
<ul style="list-style-type: none"> suggestions made for monitoring and evaluation procedures 	- Monitoring procedures need developing with other HSSCs
<ul style="list-style-type: none"> staff training is essential 	- This will be developed with local Board and Trusts
<ul style="list-style-type: none"> a detailed timetable should accompany each scheme 	- HSSCs taking a joint approach to this
<ul style="list-style-type: none"> suggestions made for complaints procedures 	- This has now been included in the scheme
<ul style="list-style-type: none"> review should be conducted together with consultees 	- Agreed
<u>Women's Forum NI</u>	
<ul style="list-style-type: none"> it would be valuable for the scheme to include the names of members of the Council 	- These change from time to time and especially with local elections
<ul style="list-style-type: none"> paragraph 12.3 of draft change <u>can</u> to <u>would</u> 	- This has been amended
<ul style="list-style-type: none"> welcome the Council's intention to keep the scheme under review 	- Noted
<ul style="list-style-type: none"> would wish to receive reports and impact assessments on policy areas 	- Will be included on circulation and consultation
<ul style="list-style-type: none"> year 1 training critical and proposed timetable noted 	- Noted
<u>Women's Resource and Development Agency</u>	
<ul style="list-style-type: none"> consider the creation of a priority list for consultation and make available the criteria upon which this is based 	- Some work being done on this within the HSSPS family
<ul style="list-style-type: none"> maximise effectiveness by collective debate 	- Working jointly with local Board and Trusts on this
<ul style="list-style-type: none"> consider the criteria for effective consultation and the barriers for various groups 	- This is being considered to enhance future consultations
<u>Youth Council for NI</u>	
<ul style="list-style-type: none"> there should be a policy of consulting young people and involving them in policy development 	- Acknowledged and agreed
<ul style="list-style-type: none"> commitment needed to forthcoming YCNI guidance on involving young people 	- This guidance will be of great assistance
<ul style="list-style-type: none"> important to have experienced and trained staff to consult with young people 	- This is recognised particularly within small organisations such as HSSCs

Proposed timetable

The following timetable summarises the actions we propose to take.

Year 1 July 2000-June 2001

Review our policies
Consider policies to see if any need an impact assessment
Carry out any impact assessments that are necessary
Review how we monitor the effect of our policies
Review our arrangements for providing information to the public
Train our staff and members
Produce a statement on the progress made to promote equal opportunities and good relations
Produce an annual review

Year 2 July 2001-June 2002

Carry out any impact assessments that are necessary
Produce a statement on the progress made to promote equal opportunities and good relations
Produce an annual review

Year 3 July 2002-June 2003

Carry out any impact assessments that are necessary
Produce a statement on the progress made to promote equal opportunities and good relations
Produce an annual review

Year 4 July 2003-June 2004

Produce a statement on the progress made to promote equal opportunities and good relations
Produce an annual review

Year 5 July 2004-June 2005

Produce a statement on the progress made to promote equal opportunities and good relations
Produce an annual review
Review our equality scheme

Appendix 6

Policies which we will consider to see if an impact assessment is needed

- Monitoring complaints
- Advice and support for complainants
- Taking part in planning and commissioning groups
- Council meetings and committees
- Annual meeting with NHSSB
- Attending Board, Trust and GP commissioning group meetings
- Responding to comments received from consultation
- Commissioning research (from both internal and external consultants)
- Research and recommendations
- Monitoring the quality of services
- Identifying needs that are not being met
- Annual programme of work
 - consultation, prioritising work, joint initiatives with other health and social services councils, working with other HPSS bodies, ownership of research findings, publicity, setting objectives, monitoring results
- Staffing issues
- Getting goods and services
- Our annual review
 - production, quantity, timing, distribution, format, accessibility, public relations
- Visiting
 - purpose, regularity, types of facilities, who visits, issues examined, relevance, methods used, reporting findings
- Three year strategy

The policies above are not listed in any particular order, but will be considered in order of importance after we receive feedback from our consultation.

Appendix 7

Training Plan

June 2000 - May 2001

Type of training	Method of training	Groups
Awareness of the Implications of Section 75 and Schedule 9	Presentations	Council members
		All staff
	Staff meetings	All staff
	Ongoing Induction Training	New staff and members
Focused training on Council's equality scheme and implications. Integration into work and attitudes	Workshops	Council members
	Presentations	All staff
	Training Courses	
Consultation skills	Workshops	All Staff
	Training Courses	