

**ANNUAL REVIEW OF PROGRESS 2006-2007**  
**TO THE EQUALITY COMMISSION ON**  
**THE IMPLEMENTATION OF THE EQUALITY AND GOOD**  
**RELATIONS DUTIES UNDER SECTION 75 OF THE**  
**NORTHERN IRELAND ACT 1998**

**BY THE**



**July 2007**

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**Chairman**

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## **Executive Summary**

The key service/policy development during 2006/2007 related to the introduction of a new model for the recruitment of trainees for dental VT and GPT, following the completion of the respective EQIA.

Likewise, the introduction of a new (e)quality-assurance instrument for the recruitment of dental trainers constituted an important milestone.

With regards to practical initiatives, the introduction of an information resource for frontline staff on how best to meet the communication needs of people with a disability is intended to contribute to improving access to information and services.

Closely linked to developments in anti-discrimination legislation, a set of information leaflets were devised for staff and line managers to raise awareness of age-related issues in employment. With the aim to promote equality of opportunity between different age groups in employment matters, the leaflets covered issues in relation to both employment policies & practices and individual behaviour in the workplace.

The new financial year will see the completion of a number of ongoing initiatives to better promote equality of opportunity and good relations. This will include two regional initiatives, in which NIMDTA has an input via the Equality Unit:

- a new e-learning resource on diversity, developed specifically for HSC staff
- launch and dissemination of an information booklet on health and social care for those new to Northern Ireland.

In addition, it is planned that the consortium organisations jointly develop a practical manual for line managers on reasonable adjustments for staff who develop a disability in their working life.

## **Section 1: Strategic Implementation of the Section 75 Duties**

To ensure the effective promotion of equality of opportunity and good relations the following equality objectives were included in the Agency's Business Plan for 2006/07:

- To create a culture which encourages innovation and excellence and provides an harmonious and safe working environment
- To develop a communications strategy to facilitate openness and honesty and mutual support between staff and members
- To ensure compliance with good HR practice and equal opportunities ensuring equal pay for work of equal value.

In addition the job descriptions of all members of staff contain reference to the promotion of equality of opportunity and good relations.

As in previous years, NIMDTA has been an active member of the HSC Agencies and Special Bodies consortium on equality, which is facilitated by the CSA Equality Unit. In 2006-2007, NIMDTA contributed £8,500 to the cost of the Unit.

## **Section 2: Screening**

In 2006/2007, a new model for the recruitment of trainees was introduced across all UK Deaneries as part of the national selection process integral to *Modernising Medical Careers*. The new process, which was agreed by all four UK Health Departments, was administered locally by the Agency. A local review of the process is currently ongoing and will help inform any decisions regarding the arrangements for 2007/08.

In order to allow tracing equality impacts, NIMDTA collected monitoring data from applicants in relation to six categories (gender, age, ethnicity, sexual orientation, religion, and disability). The data is due to be analysed in 2007/2008 and will provide a baseline to inform the screening/EQIA of any future recruitment models.

<b>Title of policy subject to screening</b>	<b>Was the <u>F</u>ull Screening Report or the <u>R</u>esult of initial screening issued for consultation?</b>  <i>Please enter <u>F</u> or <u>R</u></i>	<b>Was initial screening decision changed following consultation? <u>Y</u>es/<u>N</u>o</b>	<b>Is policy being subject to EQIA? <u>Y</u>es/<u>N</u>o? If yes indicate year for assessment.</b>
n/a			

### Section 3: Equality Impact Assessment (EQIA)

#### a) EQIA Timetable – April 2006 - March 2007

<b>Title of Policy EQIA</b>	<b>EQIA Stage at end March 07 (Steps 1-6)</b>	<b>Outline adjustments to policy intended to benefit individuals, and the relevant equality &amp; good relations categories due to be affected.</b>
n/a		

***b) Ongoing EQIA Monitoring Activities – April 2006- March 2007***

<b>Title of EQIA subject to Stage 7 monitoring</b>	<b>Indicate if differential impacts previously identified have reduced or increased</b>	<b>Indicate if adverse impacts previously identified have reduced or increased</b>
General Dental Practice Policies: VDP Trainer Selection  (progress: development of new qualitative monitoring instrument for use from 2007/2008 onwards)		

***c) 2007-08 EQIA Timetable***

<b>Title of EQIAs due to be commenced during April 2007 – March 2008</b>	<b>Existing or New policy?</b>	<b>Please indicate expected timescale of Decision Making stage i.e. Stage 6</b>
n/a		

**Section 4: Training**

NIMDTA has continued to participate in the joint training programme of the consortium. Six new members of staff attended equality awareness training. The training is reviewed on an ongoing basis, based on the evaluation by participants. Likewise, amendments were made to include new anti-discrimination legislation in the training.

For further information on the consideration of training on sexual orientation see Section 9.

## **Section 5: Communication**

As in previous years, NIMDTA's annual report has included a dedicated section on progress in relation to the promotion of equality and good relations. Moreover, the Agency's annual review of progress was placed on its website, alongside the Five Year Review of Progress.

## **Section 6: Data Collection & Analysis**

Building on the pilot of a new employment monitoring form by one of the consortium partners and incorporating recent legislative changes, the Agencies and Special Bodies designed new forms with standardised questions and categories. Accordingly, NIMDTA's new monitoring form captures data on seen out of the nine equality groupings.

In relation to service provision, the Agency decided to introduce a quality-assurance questionnaire for the recruitment of dental trainers. Covering each aspect of the recruitment process (the practice assessment, the interview, the 'Meet the Trainer' day, and the provision of information and advice throughout), the questionnaire sought feedback from both successful and unsuccessful candidates. A dedicated section on the needs and experiences of candidates based on their identities under Section 75 was included in the instrument. It has been decided to mainstream the questionnaire to allow longitudinal analyses.

A review of the existing user questionnaire for the recruitment of VT and GPT trainees is scheduled for 2007/2008.

## **Section 7: Information Provision, Access to Information and Services**

In order to improve access to services, a dedicated resource for frontline staff on communicating with people with disabilities and appropriate etiquette was developed and shared between consortium partners.

Moreover, NIMDTA is represented by the Equality Unit on the regional 'Accessible Formats Working Group' who facilitated the development of a regional contract for the provision of translation services to HSC organisations. The contract came into effect for the first time on 1 April 2006. In light of changing demographics, the contract was designed to

support health and social care organisations in providing information in accessible formats by aiming to ensure that all translations procured meet certain quality standards. Based on a competitive tendering process, a total of 10 companies were identified as best-value providers by an adjudication panel convened with members from across the HSC.

During the year, the contract was reviewed at six-monthly intervals. This involved the collation and review of monitoring information on the volume of orders placed (by organisation and language) as well as feedback from both HSC organisations and providers on the operation of the contract.

As a result, measures were agreed with a view to improving performance in relation to initial response and turn around times and ensuring that all translations are undertaken by qualified translators and proofreaders.

The group also completed work on an information booklet on health and social care in Northern Ireland, which involved extensive consultation with HSC staff and the voluntary sector. The booklet has been produced to meet an information need amongst people from minority ethnic backgrounds who have moved to Northern Ireland. By the end of March 2007, the English version had been completed as a pdf file and funds for the translation of the booklet into 13 languages had been made available by the DHSSPS.

Once the translations have been finalised, NIMDTA intends to raise awareness of the resource amongst its service users (such as trainees from outside the UK).

## **Section 8: Complaints**

NIMDTA did not receive any complaints under the terms of Section 75 during the year. If any are received, they are directed to NIMDTA's Complaints Manager, who reports and monitors the level of complaints on an annual basis.

## **Section 9: Consultation and Engagement**

NIMDTA and its consortium partners invited Rita Wild from the Lesbian Advocacy Services Initiative (LASI) to one of its meetings in order to discuss strategies for and ways of promoting equality of opportunity for

people from lesbian, gay and bisexual backgrounds. A four-stage approach was considered.

On the back of this discussion, it was agreed that a number of consortium organizations would commission pilot training for staff by Rita Wild. The pilots are to be reviewed and the learning shared with consortium partners to inform decisions on future roll out of the training to a wider range of staff.

## **Section 10: The Good Relations Duty**

The consortium has continued to explore the opportunities provided by e-learning. Important progress was also made in the development of an e-learning resource on diversity. The overall aim of the resource is to promote positive staff attitudes to diversity and to enhance behaviour that is in accordance with the letter and the spirit of equality legislation through a thought provoking and stimulating medium. Particular attention is drawn to the 'psychology of difference', which underlies human behaviour. The resource is concerned with the way staff attitudes to diversity are shaped by understanding difference and the way in which we are predisposed to deal with difference and seeks to develop staff competencies in the field of equality and diversity.

The initiative is taken forward by a working group with representatives from Boards, Trusts, and Agencies/Special Bodies. NIMDTA and its consortium partners are represented on the group by the Equality Unit.

After initial feedback was sought on the draft script from a range of HSC staff, Aurion – a company specialised in devising e-learning solutions – was tasked with providing IT consultancy services. By the end of March 2007, learning outcomes had been refined and storyboarding of the resource was under way.

## **Section 11: Additional Comments**

Tying in closely with developments in the sphere of anti-discrimination legislation, the Equality Unit on behalf of NIMDTA and consortium partners developed a set of information leaflets. Targeted at line managers on the one hand and all staff on the other, the materials sought to raise awareness of the new legislation and its implications. With the aim to promote equality of opportunity between different age groups in employment matters, the

leaflets covered issues in relation to both employment policies & practices and individual behaviour in the workplace.

In the context of the Review of Public Administration (RPA), the DHSSPS introduced vacancy controls in February 2006 across all RPA-affected organisations in health and social care. At the same time, NIMDTA's workload increased significantly during 2006/2007 with the introduction of the new recruitment model for trainees. In practice, existing admin & clerical staff worked a substantial amount of overtime in order to sustain the provision of the Agency's services in light of the restrictions on recruiting additional staff. Vacancy controls thus have had significant negative impacts on the Agency's ability to ensure that the work-life balance needs of its existing workforce can be met.

Finally, it is likely that the recent establishment of the Postgraduate Medical Education and Training Board (PMETB) as a UK regulatory body for the approval of training will provide further impetus for the mainstreaming of equality in NIMDTA's work, given that the Agency is accountable to PMETB for the development and implementation of action plans in relation to equality, diversity and opportunity.

## **Appendix: Progress on Delivery of EQIA Action Points**

### **(1) EQIA on 'Work-Life Balance Policies' (jointly with other HPSS Agencies and Bodies)**

Action Point (1):

- initiatives to raise awareness of policies across organisations

Progress:

- implemented

Action Points (2) and (3):

- collaborative work between organisations to identify and share Good Practice as well as pitfalls regarding individual policies
- develop a flagship project to showcase benefits of work-life balance

Progress:

- implemented

Action Point (4):

- introduction of a formal monitoring system for measuring applications for and uptake of work-life balance policies by S75 categories

Progress:

- NIMDTA carried out a pilot using the new template in recruitment monitoring; the evaluation of the pilot highlighted a need for streamlining the question on religion and community affiliation
- a new application form for WLB policies was drafted and piloted for term-time working in one of the partner agencies

Action Point (5):

- review of working arrangements and hours for all grades of staff

Progress:

- completed in the context of 'Agenda for Change'

**(2) EQIA on “Appointment of Staff to Act on Behalf of the Agency (Specialty Advisers, Training Programme Directors, Tutors, Course Organisers)”**

(1) To widen the application of existing appointment procedures and practices to ensure an open, transparent and consistent appointment process across all positions and specialties, taking account of the particular circumstances of smaller specialties. The Agency will make those exceptional circumstances public.

*Progress:*

- *an audit of current appointment procedures specialty by specialty has been completed*
- *good practice for policies and procedures has been identified and issued*

(2) To recruit on a fixed-term basis where it is considered to be appropriate.

*Progress:*

- *new employment legislation on fixed-term appointments poses constraints on issuing fixed-term contracts*

(3) To ensure that documentation is available for all positions regarding:

- a) job descriptions
- b) personnel specifications
- c) terms and conditions (including the number of sessions).

This will be undertaken in consultation with the Royal Colleges, the BMA and the BDA. Particular emphasis will be given to examining the equality impacts of any of these, in particular in relation

to the groups currently under-represented. The Agency commits itself to applying new guidance on 'The 5 C's of Information Provision' in all their applications.

*Progress:*

- *an audit of existing job descriptions, personnel specifications, T&Cs has been carried out*
- *all documentation has been reviewed and updated*

(4) In putting together interview panels, the Agency will encourage individuals from under-represented groups to become involved.

*Progress:*

- *a prompt has been integrated into information materials to Training Committees*

(5) To draft a communication strategy, i.e. a policy on the dissemination of information, outlining procedures for advertising positions (e.g. through HPSS-wide job trawls) and disseminating written information on positions (i.e. job descriptions, personnel specifications, terms and conditions) to all existing and new doctors.

*Progress:*

- *new proposals for policies and procedures have been drafted and submitted to the NIMDTA Board in the context of the implementation of Specialty Schools*

(6) To seek to produce a Code of Practice for the appointment of medical and dental practitioners to become members of Specialty Training Committees.

*Progress:*

- *new proposals for policies and procedures have been drafted and submitted to the NIMDTA Board*

(7) To encourage Committees to explore the viability of introducing the use of videoconferencing facilities and rotating the venue of meetings. Agency will provide Committees with advice and guidance on range of locations and venues available, esp. outside of Belfast. Agency will encourage Committees varying meeting times and considering availability of childcare wherever possible.

*Progress:*

- *an audit of current arrangements has been carried out*
- *option of videoconferencing will be kept under review along with technological progress; currently two options (1) ISDN (2) fibre-optic link – both are cost-intensive; experience to date has shown a low interest in uptake by potential users*

(8) Equality data on seven of the nine groups will be collected at the application stage in order to allow for ongoing monitoring in compliance with provisions under the Data Protection Act.

*Progress:*

- *data collection has been commenced*

(9) To publish summary monitoring data on an annual basis to provide greater transparency as to applicants and appointees.

*Progress:*

- *no progress to date*

(10) To include a statement in future advertisements that NIMDTA is an equal opportunities employer (spelling out all nine groups) and that applications from the under-represented groups will be particularly welcome.

*Progress:*

- *implemented in full*

(11) To seek to further develop its engagement with organisations representing the interests of Section 75 groups, in particular with regards to exploring potential barriers and ways of addressing them.

*Progress:*

- *ongoing*

(12) To introduce both equality awareness training and induction training for those working on its behalf and to distribute information materials on equality to staff.

*Progress:*

- *training programme has been developed and individuals have been encouraged to attend*

(13) To continue to lobby the DHSSPS for supporting the collection of quantitative monitoring data on all GPs, GDPs and hospital consultants.

*the DHSSPS has recently committed itself to developing a comprehensive monitoring strategy in collaboration with HSC organisations*

### **(3) EQIA on 'General Dental Practice Policies'**

Action Point (1):

- monitoring of trainer applicant data
- annual monitoring of trainer data (eligible and active trainers) for age, gender, religion, marital status, dependents, ethnicity, disability; publication on the website
- publication of summary statistics on applicants on the website

*Progress*

- *monitoring forms are collected as part of the normal application procedure*
- *names and location of appointed training practices are published on the website*

Action Point (2):

- explore scope for collecting monitoring data for all GDPs

*Progress*

- *no further progress since 2003-2004*

Action Point (3):

- explore feasibility of piloting video-conferencing facilities

*Progress*

- *Video-conferencing facilities have been sourced. Attendances at pilot courses were extremely poor.*

**(4) EQIA on 'General Practice Policies'**

Action Point (1):

- publish details on how to become a trainer and retainer supervisor on website; clarify information regarding the eligibility of part-time GPs

*Progress*

- *information is available from the Agency's website.*

Action Point (2):

- annual monitoring of trainer data (eligible and active trainers) for age, gender, religion, marital status, dependents, ethnicity, disability; publication on the website

*Progress*

- *with the recent introduction of the new employment monitoring forms, the Agency will explore the scope for employing the template on a wider scale in 2007/2008*

Action Point (3):

- explore scope for collecting monitoring data for all GPs

Progress

- no further progress since 2003-2004

### **(5) EQIA on 'Specialist Registrar Policies'**

Action Point (1):

- exploring scope for organising induction event by specialty

*Progress*

- *Individual specialties are now providing induction programmes.*

Action Point (2):

- include welcome statement for applications from women and members from black and minority ethnic groups for Supernumerary SpR scheme in information provided

*Progress*

- *implemented fully*

Action Point (3):

- ensure greater transparency of placement process

*Progress*

- *individual needs of trainees in relation to placements are now sought and decisions are made based on evidence from trainees in the context of the need to ensure that all training opportunities are availed of across Northern Ireland*

Action Point (4):

- monitoring applications for flexible training scheme and supernumerary scheme

*Progress*

- *the supernumerary SpR scheme has been discontinued in its previous form*
- *the Agency has secured funding for additional flexible training posts; in addition, NIMDTA has accommodated trainees through other arrangements such as job share*

**(6) EQIA on 'Recruitment of Trainees for Dental Vocational Training (VT) and Dental General Professional Training (GPT)'**

Action Point (1): Drawing on the expertise of HR professionals, and in collaboration with trainers and organisations representing the interests of people from Section 75 groups, NIMDTA will develop selection criteria guiding the recruitment process of all trainees. This will involve drafting personnel specifications, designing shortlisting criteria, interview questions and expected answers.

Progress:

- *fully implemented*

Action Point (2): NIMDTA will devise a standardised application form. All applicants will submit their application forms alongside their monitoring forms to NIMDTA. The Agency will also consult directly with potential applicants to determine whether or not they would advocate inclusion of a sexual orientation category on the monitoring form.

Progress:

- *a standardised application form has been devised*
- *no progress has been made with regard to consultation with potential applicants regarding sexual orientation being included in the monitoring form.*

Action Point (3): The Agency will ensure that HR professionals are represented on interview panels.

progress:

- *fully implemented - a policy has been developed which stipulates the use of an HR specialist on all appointment panels for Dental VT and GPT*

Action Point (4): The Agency will explore the scope for drawing on the expertise of members of the Community Dental Service, who are not presently involved in the recruitment process, but are well-experienced in equality issues and employment legislation.

progress:

- *fully implemented – community dental services are represented on both GPT trainer and trainee appointment panels*

Action Point (5): The Agency will ensure that in its face-to-face communication with potential applicants, it will encourage those facing particular barriers to apply.

progress:

- *fully implemented - NIMDTA offers the opportunity for face to face discussions for any potential applicant with a named Adviser. This information is available on the website and in information documents.*
- *UK Dental schools are contacted with information regarding an information session for non – NI dental graduates.*

Action Point (6): Following concerns on the issue of the under-representation of Protestant trainees, and whether or not this is directly linked to the religious belief of trainers, the Agency will undertake further investigation.

progress:

- *Data on under-representation by particular groups is available through the monitoring form. It is the intention of the Agency to investigate findings.*
- *The CSA's Equality Unit has recently been commissioned to carry out qualitative and quantitative studies on the changes made to the recruitment process and perceptions of the training programmes currently in place.*

Action Point (7): In order to build the capacity of trainers to meet the needs of different individuals and to raise awareness of NIMDTA's statutory requirements in relation to the policy, the Section 75 element of the recruitment and selection training will be strengthened.

progress:

- *All interview panel members are fully trained in recruitment & selection. Section 75 is covered in this training.*

Action Point (8): NIMDTA will introduce the requirement for successful trainer candidates to attend equality awareness training.

- *To be Implemented for 2008/09 schemes*

progress:

Action Point (9): The Agency will liaise with QUB School of Dentistry with the aim to offer joint training courses in interview skills for students.

progress:

- *The Agency is keen to encourage applications from outside Northern Ireland to the schemes and as such feels that offering training on interview skills to QUB undergraduates could be deemed as discriminatory to other UK undergraduates. The Agency understands through participation in a QUB/NIMDTA Liaison Group that the School of Dentistry now offers interview skills as part of the undergraduate curriculum*

- *The Agency offers Interview skills training to appointed trainees as part of the training programme.*

Action Point (10): The Agency will introduce a centralised recruitment model. For the VT schemes, an independent interview panel is formed, involving: a chairperson from the dental profession; an Human Resources professional; three dental practitioners who have acted as trainers within the past five years but who will not act as trainers during the year for which trainees are recruited. Applicants submit one application form to NIMDTA. The panel conducts all interviews and selects 24 suitable candidates, based on a set of selection criteria, which will be developed in a participative manner (see Action Point 1). A waiting list of further candidates will likewise be drawn up. All selected candidates are invited to visit the training practices and meet the trainers, who will conduct informal interviews. All trainers and trainees then specify their top ten preferences. The independent panel undertakes the matching process.

progress:

- *Fully implemented with the exception of visits to training practices which was deemed to be unfair to candidates from outside Northern Ireland. A “Meet the Trainer” event is organised to allow **all** candidates the opportunity to meet **all** of the appointed trainers. Trainees and Trainers can rank as many preferences as they wish.*