

**DOJ Section 75**

**EQUALITY SCREENING FORM**

**Title of Policy: The Review Tribunal (Amendment) Rules (Northern Ireland) 2019**

***Revised Feb 2018***

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**The Legal Background**

Under section 75 of the Northern Ireland Act 1998, the Department is required **to have due regard to the need to promote equality of opportunity:**

● between person of different religious belief, political opinion, racial group,

age, marital status or sexual orientation;

● between men and women generally;

● between persons with a disability and persons without; and,

● between persons with dependants and persons without1.

Without prejudice to the obligations set out above, the Department is also required to:

● **have regard to the desirability of promoting good relations between**

**persons of different religious belief, political opinion or racial**

**group; and**

● **meet legislative obligations under the Disability Discrimination Order.**

**Introduction**

1. This form should be read in conjunction with the Equality Commission’s revised Section 75 guidance, “Effective Section 75 Equality Assessments: Screening and Equality Assessments” which is available on the Equality Commission’s website.

<http://www.equalityni.org/ECNI/media/ECNI/Publications/Employers%20and%20Service%20Providers/Public%20Authorities/S75Advice-ScreeningEQIA.pdf>

**Section 75** statutory duties apply to **internal policies** (relating to people who work for department), as well as **external policies** (relating to those who are, or could be, served by the department).

1. The purpose of screening is to identify those policies that are likely to have an impact on equality of opportunity and/or good relations and so determine whether an Equality Impact Assessment (EQIA) is necessary. Screening should be introduced at an early stage when developing or reviewing a policy.

1A list of the main groups identified as being relevant to each of the section 75 categories is at Annex B of the document.

3. The lead role in the screening of a policy should be taken by the policy decision-maker who has the authority to make changes to that policy and should involve, in the screening process:

* other relevant team members;
* those who implement the policy;
* staff members from other relevant work areas; and
* key stakeholders.

A flowchart which outlines the screening process is provided at Annex A.

4. The first step in the screening exercise is to gather evidence to inform the screening decisions. Relevant data may be either quantitative or qualitative or both (this helps to indicate whether or not there are likely equality of opportunity and/or good relations impacts associated with a policy). Relevant information will help to clearly demonstrate the reasons for a policy being either ‘screened in’ for an equality impact assessment or ‘screened out’ from an equality impact assessment.

5. The absence of evidence does not indicate that there is no likely impact but if none is available, it may be appropriate to consider subjecting the policy to an EQIA.

6. Where data/evidence gaps exist consider engaging with the main representative groups directly, for example Disability Action, Rainbow, and NICCY to find out what you need to know. Bring stakeholders together to discuss policy or link up with other UK bodies who may have similar policies.

7. Screening provides an assessment of the likely impact, whether ‘minor’ or ‘major’, of its policy on equality of opportunity and/or good relations for the relevant categories. In some instances, screening may identify the likely impact is none.

8. Contact [EqualityandStaffSupportServices@justice-ni.x.gsi.gov.uk](mailto:EqualityandStaffSupportServices@justice-ni.x.gsi.gov.uk) at any stage of the process for support or guidance.

**Screening decisions**

9. Completion of screening should lead to one of the following three outcomes. The policy has been:

1. ‘screened in’ for equality impact assessment;
2. ‘screened out’ *with* mitigation or an alternative policy proposed to be adopted; or
3. ‘screened out’ *without* mitigation or an alternative policy proposed to be adopted.

**Screening and good relations duty**

10. The Commission recommends that a policy is ‘screened in’ for equality impact assessment if the likely impact on **good relations** is ‘major’. While there is no legislative requirement to engage in an equality impact assessment in respect of good relations, this does not necessarily mean that equality impact assessments are inappropriate in this context.

**Part 1**

**Definition of Policy**

**11.** There have been some difficulties in defining what constitutes a policy in the context of section 75. To be on the safe side it is recommended that you consider any new initiatives, proposals, schemes or programmes as policies or changes to those already in existence. It is important to remember that even if a full EQIA has been carried out in an “overarching” policy or strategy, it will still be necessary for the policy maker to consider if further screening or an EQIA needs to be carried out in respect of those policies cascading from the overarching strategy.

**Overview of Policy Proposals**

**12.** The aims and objectives of the policy must be clear and terms of reference well defined. You must take into account any available data that will enable you to come to a decision on whether or not a policy may or may not have a differential impact on any of the s75 categories.

**Policy Scoping**

**13.** The first stage of the screening process involves scoping the policy under consideration. The purpose of policy scoping is to help prepare the background and context and set out the aims and objectives for the policy, being screened. At this stage, scoping the policy will help identify potential constraints as well as opportunities and will help the policy maker work through the screening process on a step by step basis.

**Part 1: Policy Scoping**

**14. Information about the policy**

|  |
| --- |
| **Name of the Policy/ decision to be screened**  The Review Tribunal (Amendment) Rules (Northern Ireland) 2019: to detail the procedure to be followed in proceedings before the reconstituted Mental Health Review Tribunal (to be renamed the ‘Review Tribunal’). |
|  |
| **Is this an existing, revised or a new policy / decision?** |
| This is a new policy which provides for the reconstitution of the existing Mental Health Review Tribunal (MHRT) into the Review Tribunal in order to provide a safeguard by way of right of appeal for individuals who lack mental capacity and who have been deprived of their liberty.  The MHRT is an independent judicial body set up under the Mental Health (NI) Order 1986 (“the Order”) which reviews cases of patients compulsorily detained or subject to guardianship under the Order.  The Mental Capacity Act (NI) 2016 (“the Act”) was brought forward jointly by the Departments of Health and Justice to implement the recommendations of the Bamford Review of Mental Health and Learning Disability (2007). The Act applies to people aged 16 or over and considers their capacity to make decisions about their health, welfare or finances and the safeguards that must be put in place if they lack the capacity to do so. The Act also provides a framework for decision making by the Health and Social Care Trusts in respect of deprivation of liberty. This framework includes a right of appeal to a Review Tribunal.  The Act will be partially commenced on 1 October 2019 to provide a statutory framework for authorising deprivations of liberty. This requires the current MHRT to be transformed into the Review Tribunal to allow it to take on the additional role of considering appeals in relation to deprivations of liberty. The Review Tribunal (Amendment) Rules (Northern Ireland) 2019 detail the procedure on appeal. |
| **What is it trying to achieve? (intended aims/outcomes)** |
| In 2014, the UK Supreme Court provided judgment in the case of *Cheshire West* and defined what constitutes a deprivation of liberty. In summary, the court found that a person is deprived of his or her liberty if under continuous supervision and control, not free to leave and the state is, in some way, involved in the deprivation of liberty. The Department of Health estimate that there are around 7,500 individuals in Northern Ireland who fall into this category and are currently unlawfully deprived of their liberty (mainly in residential care and nursing homes, day care settings and in private dwellings).  The Review Tribunal will provide individuals deprived of their liberty with a safeguard by means of a right of appeal for a review of their cases from both medical and non-medical perspectives. The protection of individuals who lack mental capacity from being unlawfully deprived of their liberty ensures compliance with Article 5 of the European Convention on Human Rights (guaranteeing a person’s right to liberty and protecting against arbitrary deprivation of liberty). |
| **Are there any Section 75 categories which might be expected to benefit from the intended policy? If so, explain how.** |
| Age and disability: The estimated number of deprivation of liberty (DoL) cases in Northern Ireland and the subsequent potential caseload for the Review Tribunal has been provided by the Department of Health and is based on DoLs data collections in England for 2015-16. A breakdown of individuals with DoLs applications by disability shows that 91% of individuals with a DoL application had some form of disability and 51% of applicants were dementia sufferers. Dementia is more common in the older age group. |
| **Who initiated or wrote the policy?** |
| Civil Justice Policy Division, DoJ have responsibility for the amendment to the Rules. The Mental Capacity Act (NI) 2016 was brought forward jointly by the Departments of Health and Justice. |
| **Who owns and who implements the policy?**  The Rules are made by the Department after consultation. The implementation of the revised procedures and the operation of the reconstituted Review Tribunal is the responsibility of NICTS. |
|  |

**15. Implementation factors**

Are there any factors which could contribute to/detract from the intended aim/outcome of the policy/decision?

If yes, are they

*Tick Box*

financial

legislative

other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The expanded remit of the Tribunal and the projected increase in caseload and required sittings will involve additional costs largely in consequence of tribunal member fees and legal aid. There will also be pre-implementation start-up costs including an implementation team, restructuring of accommodation and training for tribunal members.**

**Partial commencement of the Act is the responsibility of the Department of Health and a Commencement Order is required.**

**16. Main stakeholders affected**

Who are the internal and external stakeholders (actual or potential) that the policy will impact upon?

*Tick Box*

staff (**NICTS staff providing secretariat and other administrative services to the Tribunal**)

service users (**Individuals who lack capacity and who have been deprived of their liberty and their legal representatives)**

other public sector organisations (**NI Health and Social Care Trusts, Attorney General’s Office**)

voluntary/community/trade unions (**Voluntary bodies providing mental health advocacy, Disability and Age Advocacy and Support Groups**)

other, please specify (**existing MHRT members and future Review Tribunal members**)

**17. Other policies with a bearing on this policy**

*what are they?*

|  |
| --- |
| Not applicable |

*who owns them?*

|  |
| --- |
| Not applicable |

**18. Available Evidence**

Evidence to help inform the screening process may take many forms. Set out all evidence /data (both \*qualitative and quantitative) below along with details of the different groups you have met and / or consulted with to help inform your screening assessment. Specify details for each of the Section 75 categories.

|  |  |
| --- | --- |
| **Section 75 Category** | **Details of evidence/information** |
| Religious belief | No relevant data or research identified |
| Political opinion | No relevant data or research identified |
| Racial group | No relevant data or research identified |
| Age | A breakdown of individuals with DoLs applications from 2015/16 in England by disability shows that 51% of applicants were dementia sufferers. Dementia is more common in the older age group.  (*Data source: Deprivation of Liberty Safeguards (DoLs) data collections for 2015-16, provided by Department of Health*) |
| Marital status | No relevant data or research identified |
| Sexual orientation | No relevant data or research identified |
| Men and Women generally | No relevant data or research identified |
| Disability | A breakdown of individuals with DoLs applications by disability shows that 91% of individuals with a DoL application have some form of disability.  (*Data source: Deprivation of Liberty Safeguards (DoLs) data collections for 2015-16, provided by Department of Health*) |
| Dependants | No relevant data or research identified. |

\***Qualitative data** – refers to the experience of individuals related in their own terms, and based on their own experience and attitudes. Qualitative data is often used to complement quantitative data to determine why policies are successful or unsuccessful and the reasons for this.

**Quantitative data** – refers to numbers (that is quantities), typically derived from either a population in general or samples of that population. This information is often analysed either using descriptive statistics (which summarise patterns), or inferential statistics (which are used to infer from a sample about a wider population).

**19. Needs, experiences and priorities**

Taking into account the information referred to above, what are the different needs, experiences and priorities of each of the following categories, in relation to the particular policy/decision? Specify details for each of the Section 75 categories.

|  |  |
| --- | --- |
| **Section 75 Category** | **Details of evidence/information** |
| Religious belief | No relevant data or research identified |
| Political opinion | No relevant data or research identified |
| Racial group | No relevant data or research identified |
| Age | A breakdown of individuals with DoLs applications from 2015/16 in England by disability shows that 51% of applicants were dementia sufferers. Dementia is more common in the older age group.  (*Data source: Deprivation of Liberty Safeguards (DoLs) data collections for 2015-16, provided by Department of Health*) |
| Marital status | No relevant data or research identified |
| Sexual orientation | No relevant data or research identified |
| Men and Women generally | No relevant data or research identified |
| Disability | A breakdown of individuals with DoLs applications by disability shows that 91% of individuals with a DoL application have some form of disability.  (*Data source: Deprivation of Liberty Safeguards (DoLs) data collections for 2015-16, provided by Department of Health*) |
| Dependants | No relevant data or research identified |

**Part 2**

**SCREENING DECISIONS**

**20**. **Decision** - **In favour of none**

If the conclusion is **none** in respect of all of the Section 75 equality of opportunity and/or good relations categories, then the decision may be to screen the policy out. If a policy is **‘screened out’** as having no relevance to equality of opportunity or good relations, give details of the reasons for the decision taken.

* **Considerations** –
* The policy has no relevance to equality of opportunity or good relations.
* The policy is purely technical in nature and will have no bearing in terms of its likely impact on equality of opportunity or good relations for people within the equality and good relations categories.

**21.** **Decision** - **In favour of a ‘major’ impact**

If the conclusion is **major** in respect of one or more of the Section 75 equality of opportunity and/or good relations categories, then consideration should be given to subjecting the policy to the equality impact assessment procedure (EQIA).

* **Considerations-**
* Is the policy significant in terms of its strategic importance?
* The potential equality impacts are unknown, because, for example, there is insufficient data upon which to make an assessment or because they are complex and it would be appropriate to conduct an equality impact assessment in order to better assess them;
* The potential equality and/or good relations impacts are likely to be adverse or are likely to be experienced disproportionately by groups of people including those who are marginalised or disadvantaged;
* Further assessment offers a valuable way to examine the evidence and develop recommendations in respect of a policy about which there are concerns amongst affected individuals and representative groups, for example in respect of multiple identities;
* The policy is likely to be challenged by way of judicial review;
* The policy is significant in terms of expenditure.

**22. Decision - In favour of ‘minor’ impact**

If the conclusion is **minor** in respect of one or more of the Section 75 equality categories and/or good relations categories, then consideration should still be given to proceeding with an equality impact assessment, or to:

• measures to mitigate the adverse impact; or

• the introduction of an alternative policy to better promote equality of opportunity and/or good relations.

* **Considerations –**
* The policy is not unlawfully discriminatory and any residual potential impacts on people are judged to be negligible;
* The policy, or certain proposals within it, are potentially unlawfully discriminatory, but this possibility can readily and easily be eliminated by making appropriate changes to the policy or by adopting appropriate mitigating measures;
* Any asymmetrical equality impacts caused by the policy are intentional because they are specifically designed to promote equality of opportunity for particular groups of disadvantaged people;
* By amending the policy there are better opportunities to better promote equality of opportunity and/or good relations.

**Part 2 Screening questions**

|  |  |  |
| --- | --- | --- |
| **2.1** What is the likely impact on equality of opportunity for those affected by this policy, for each of the Section 75 equality categories? | | |
| **Section 75 category** | **Details of policy impact** | **Level of impact? Minor/Major/None** |
| Religious belief | **No relevant data or research identified** | **None** |
| Political opinion | **No relevant data or research identified** | **None** |
| Racial group | **No relevant data or research identified** | **None** |
| Age | **No adverse impact. The rules govern the procedure of the Tribunal and apply to all applicants regardless of their age. It is estimated that the projected caseload for the reconstituted Tribunal will include a significant proportion of dementia sufferers. Dementia is more common in the older age group. Older people may, therefore, be likely to benefit from the provision of a safeguard by means of a right of appeal to a Review Tribunal for a review of their case.** | **None** |
| Marital status | **No relevant data or research identified** | **None** |
| Sexual orientation | **No relevant data or research identified** | **None** |
| Men and Women generally | **No relevant data or research identified** | **None** |
| Disability | **No adverse impact. It is estimated that the projected caseload for the reconstituted Tribunal will include a very high proportion of individuals with a disability. Those with a disability may, therefore, be likely to benefit from the provision of a safeguard by means of a right of appeal to a Review Tribunal for a review of their case.** | **None** |
| Dependants | **No relevant data or research identified** | **None** |

|  |  |  |
| --- | --- | --- |
| **2.2** Are there opportunities to better promote equality of opportunity for people within the Section 75 equalities categories? | | |
| **Section 75 category** | **If Yes, provide details** | **If No, provide reasons** |
| Religious belief |  | **The proposals will enhance access to justice for those who lack capacity and are deprived of their liberty. This will impact positively on all categories.** |
| Political opinion |  | **The proposals will enhance access to justice for those who lack capacity and are deprived of their liberty. This will impact positively on all categories.** |
| Racial group |  | **The proposals will enhance access to justice for those who lack capacity and are deprived of their liberty. This will impact positively on all categories.** |
| Age |  | **The proposals will enhance access to justice for those who lack capacity and are deprived of their liberty. This will impact positively on all categories.** |
| Marital status |  | **The proposals will enhance access to justice for those who lack capacity and are deprived of their liberty. This will impact positively on all categories.** |
| Sexual orientation |  | **The proposals will enhance access to justice for those who lack capacity and are deprived of their liberty. This will impact positively on all categories.** |
| Men and Women generally |  | **The proposals will enhance access to justice for those who lack capacity and are deprived of their liberty. This will impact positively on all categories.** |
| Disability |  | **The proposals will enhance access to justice for those who lack capacity and are deprived of their liberty. This will impact positively on all categories.** |
| Dependants |  | **The proposals will enhance access to justice for those who lack capacity and are deprived of their liberty. This will impact positively on all categories.** |

|  |  |  |
| --- | --- | --- |
| **2.3.** To what extent is the policy likely to impact on good relations between people of different religious belief, political opinion or racial group? | | |
| **Good relations category** | **Details of policy impact** | **Level of impact Minor/Major/None** |
| Religious belief | **Not applicable** | **None** |
| Political opinion | **Not applicable** | **None** |
| Racial group | **Not applicable** | **None** |

|  |  |  |
| --- | --- | --- |
| **2.4.** Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group? | | |
| **Good relations category** | **If Yes, provide details** | **If No, provide reasons** |
| Religious belief |  | **No opportunities to promote good relations within any of the good relations categories are expected.** |
| Political opinion |  | **As above.** |
| Racial group |  | **As above.** |

**Additional Considerations**

**Multiple Identity**

**23.** Generally speaking, people can fall into more than one Section 75 category. Taking this into consideration, are there any potential impacts of the policy/decision on people with multiple identities?

(*For example; disabled minority ethnic people; disabled women; young Protestant men; and young lesbians, gay and bisexual people).*

**None apparent.**

**24.** Provide details of data on the impact of the policy on people with multiple identities. Specify relevant Section 75 categories concerned.

|  |
| --- |
| **The data would suggest that the policy will mainly affect an older disabled group.** |

**Part 3 Screening Decision**

**3.1**. **Screened In** - If the decision is to conduct an equality impact assessment, please provide details of the rationale and relevant evidence to support this decision.

|  |
| --- |
| Not applicable. |

**3.2**. **Screened Out** – No EQAI necessary (no impact)

If the decision is not to conduct an equality impact assessment, please provide details of the rationale and relevant evidence to support this decision.

|  |
| --- |
| It is not expected that any s75 categories would be adversely impacted by this rule change.  The proposals will enhance access to justice for all categories by providing individuals deprived of their liberty with a safeguard by means of a right of appeal to a Review Tribunal for a review of their cases from both medical and non-medical perspectives. This safeguard will protect individuals who lack mental capacity from being unlawfully deprived of their liberty and will ensure compliance with Article 5 of the European Convention on Human Rights.  Whilst it is difficult to estimate the potential caseload and breakdown of cases which are likely to come before the reconstituted Tribunal, figures provided by the Department of Health (sourced from data from England for 2015/16) suggest that around half of DoL appeals may be from dementia sufferers, the majority of which are likely to fall into the older age group. The data also suggests that the vast majority of all appeals will be from individuals suffering from a disability.  However, there will be no adverse impact on these groups – they are likely to benefit more from these proposals as they are more likely to fall into the category of those who will have the right to challenge a decision to deprive them of their liberty. |

**3.3.** **Screened Out – Mitigating Actions** (minor impacts)

When the decision is that the likely impact is ‘minor’ and an equality impact assessment is not to be conducted, you may consider mitigation to lessen the severity of any equality impact, or the introduction of an alternative policy to better promote equality of opportunity or good relations.

Can the policy/decision be amended or changed or an alternative policy introduced to better promote equality of opportunity and/or good relations?

If so, give the **reasons** to support your decision, together with the proposed changes/amendments or alternative policy. Explain how these actions will address the inequalities.

|  |
| --- |
| Not applicable. It is not expected that any s75 categories would be adversely impacted by this rule change. |

**Timetabling and Prioritising**

**25.** Factors to be considered in timetabling and prioritising policies for equality impact assessment.

**26.** If the policy has been **‘screened in’** for equality impact assessment, then please answer the following questions to determine its priority for timetabling the equality impact assessment.

**27.** On a scale of 1-3, with 1 being the lowest priority and 3 being the highest, assess the policy in terms of its priority for equality impact assessment.

|  |  |
| --- | --- |
| **Priority criterion** | **Rating (1-3)** |
| Effect on equality of opportunity and good relations |  |
| Social need |  |
| Effect on people’s daily lives |  |
| Relevance to a public authority’s functions |  |

Note: The Total Rating Score should be used to prioritise the policy in rank order with other policies screened in for equality impact assessment. This list of priorities will assist in timetabling. Details of the Equality Impact Assessment Timetable should be included in the quarterly Screening Report.

**28**. Is the policy affected by timetables established by other relevant public authorities?

* If yes, please provide details.

|  |
| --- |
|  |

**Part 4 Monitoring**

1. Section 75 places a requirement on the Department to have equality monitoring arrangements in place in order to assess the impact of policies and services etc. and to help identify barriers to fair participation and to better promote equal opportunity.
2. Effective monitoring will help identify any future adverse impact arising from the policy which may lead the public authority to conduct an equality impact assessment, as well as help with future planning and policy development.
3. Outline what data you will collect in the future in order to monitor the impact of this policy/ decision on equality, good relation and disability duties.

|  |  |
| --- | --- |
| **Equality** | Tribunal caseload will be monitored by NICTS. |
| **Good relations** | N/A |
| **Disability Duties** | N/A |

**Part 5 Formal Record of Screening Decision**

|  |
| --- |
| **Title of Proposed Policy / Decision being screened**  **The Review Tribunal (Amendment) Rules (Northern Ireland) 2019** |

**I can confirm that the proposed policy/decision has been screened for –**

|  |  |
| --- | --- |
|  | **Equality of opportunity** |
|  | **Good Relations** |
|  | **Disability duties** |

**On the basis of the answer to the screening questions, I recommend that this policy /decision is –**

|  |  |
| --- | --- |
|  | **Screened in – necessary to conduct a full EQIA** |

|  |  |
| --- | --- |
|  | **Screened Out – no EQIA necessary (no impacts)** |

|  |  |
| --- | --- |
|  | **Screened Out – mitigating actions (minor impacts)** |

**Part 6 Approval and Authorisation**

***(Have you sent this document to the Equality Unit prior to obtaining signature?)***

|  |  |  |
| --- | --- | --- |
| **Screened/completed by:** | **Grade** | **Date** |
| **Jill Trainor** | **DP** | **17/5/19** |
| **Approved by (Grade 7 or above):** | | |
| **Name**  **Clare Irvine** | **Grade 6 (SPLO)** | **5/6/19** |

**Quality Assurance**

**Prior to final approval** the Screening Form should be forwarded to [EqualityandStaffSupportServices@justice-ni.x.gsi.gov.uk](mailto:EqualityandStaffSupportServices@justice-ni.x.gsi.gov.uk) for comment/quality assurance. Contact the branch should you require advice or have any queries prior to this stage.

Any NIPS forms should be forwarded to [Peter.Grant@justice-ni.x.gsi.gov.uk](mailto:Peter.Grant@justice-ni.x.gsi.gov.uk)

When you receive a response and there are no further considerations required, the form should be ‘signed off’ and approved by a senior manager responsible for the policy, this would normally be at least grade 7.

The completed Screening Form should be placed on the DOJ Website where it will be made easily accessible to the public and be available on request. In addition, it will be included in a quarterly listing of all screenings completed during each 3 month period and issued to consultees.

**The Screening exercise is now complete**.

Please retain a record in your branch and send a copy for information to:-

Equality and Staff Support Services (ESSS)

Room 3.4, Castle Buildings

Stormont Estate

BELFAST

BT4 3SG

Tel: 02890 522611

or e-mail to [EqualityandStaffSupportServices@justice-ni.x.gsi.gov.uk](mailto:EqualityandStaffSupportServices@justice-ni.x.gsi.gov.uk)

**ANNEX A**

**SCREENING FLOWCHART**

**Policy Scoping**

Consider Available Data and Evidence

**Screening Questions**

Apply screening questions

Consider multiple identities

**Screening Decision**

None/Minor/Major

**‘None’**

Screened out

**‘Minor’**

Screened

out with

mitigation

**‘Major’**

Screened in

for EQIA

**Send the form to**

[**EqualityandStaffSupportServices@justice-ni.x.gsi.gov.uk**](mailto:EqualityandStaffSupportServices@justice-ni.x.gsi.gov.uk)

**When returned arrange to be signed off by Grade 7 or above**

Concerns /queries raised i.e. evidence re: screening decision

Publish completed Screening Form on **DOJ Internet**

**EQIA**

Re-consider Screening

Future Monitoring

**ANNEX B**

**MAIN GROUPS IDENTIFIED AS RELEVANT TO THE SECTION 75 CATEGORIES**

|  |  |
| --- | --- |
| **Category** | **Main Groups** |
| Religious Belief | Protestants; Catholics; people of other religious belief; people of no religious belief |
| Political Opinion | Unionists generally; Nationalists generally; members/supporters of any political party |
| Racial Group | White people; Chinese; Irish Travellers; Indians; Pakistanis; Bangladeshis; Black Africans; Afro Caribbean people; people of mixed ethnic group, other groups |
| Age | For most purposes, the main categories are: children under 18; people aged between 18 and 65. However the definition of age groups will need to be sensitive to the policy under consideration. For example, for some employment policies, children under 16 could be distinguished from people of working age |
| Marital/Civil Partnership Status | Married people; unmarried people; divorced or separated people; widowed people; civil partnerships |
| Sexual Orientation | Heterosexuals; bisexual people; gay men; lesbians |
| Men and Women generally | Men (including boys); women (including girls); trans-gender and trans-sexual people |
| Persons with a disability and persons without | Persons with a physical, sensory or learning disability as defined in Schedules 1 and 2 of the Disability Discrimination Act 1995. |
| Persons with dependants and persons without | Persons with primary responsibility for the care of a child; persons with personal responsibility for the care of a person with a disability; persons with primary responsibility for a dependent elderly person. |