

Equality House
7-9 Shaftesbury Square
Belfast
BT2 7DP

18 December 2024

Transformation Branch
Regional Health Services Transformation
Department of Health
Annex 3, Castle Buildings
Stormont Estate, Belfast, BT4 3SQ

Issued via email to:

rebuildinghsc.services@health-ni.gov.uk

Dear Sir or Madam,

RE: Hospitals - Creating a Network for Better Outcomes - Public Consultation

Thank you for your correspondence seeking views on the Department of Health's framework document outlining proposals on [creating a hospital network to achieve better outcomes for all](#).

The Commission welcomes the aspirations outlined in the document to:

- make our health and social care system safer and better for all by reducing health inequalities;
- maximise productivity and making best use of available funding resources to deliver more financially sustainable health and social care services; and
- create a resilient service that leads to a reduction in reactive safety related service changes or collapses.

We note that an important aim of the framework is to facilitate more effective integration across the hospital network with Centres of Excellence which allow for sustainable specialisation of services.

Equality and Human Rights Obligations

The Commission considers that the proposed framework provide an opportunity for the Department to actively contribute to the progressive realisation of the right to health and social care as articulated, inter alia, in the International Covenant for Economic, Social and Cultural Rights (ICESCR), the Convention on the Rights of the Child (CRC), the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the Convention on the Elimination of All Forms of Racial Discrimination (CERD) and the Convention on the Rights of Persons with Disabilities (CRPD).

We would particularly seek to highlight the following:

- **UNCRPD:** Article 25 of the UNCRPD requires that States Parties recognize that persons with disabilities have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability and to provide health services as close as possible to people's own communities, including in rural areas.

While some of the proposed measures correspond well with the delivery of Government's obligations under the UNCRPD, further consideration should be given to:

- the direct involvement and engagement of disabled people;
 - access to information and services, including in relation to independent living;
 - inclusion of disabled people within the cultural, social, economic life of the community with appropriate support;
 - the multiple identities of disabled people and other equality groups.
- **Age Appropriate Delivery of Services:** The Commission advises that care needs to be taken to ensure equality of opportunity in service provision applies to all aspects of health and social care regardless of age. The Department should include a commitment to take appropriate actions, including an in-depth review of the degree to which age discrimination may exist within health and social care prior to the introduction of legislation prohibiting discrimination on the grounds of age in the provision of goods and services.
 - **Monitoring and Review:** The Commission recommends that equality considerations are integral to the development, implementation and review of legislation, policies and programmes arising from the proposals. Further consideration should also be given as to how the Section 75 and UNCRPD mechanisms can best assist in the monitoring and review process.
 - **Section 75 Duties:** The Commission notes the commitment in the consultation document that 'To ensure that tackling health inequalities is a key consideration, service changes as a result of reconfiguration decisions should consider all impacts and be subject to necessary screening (equality/rural needs etc) in line with legislation and HSCT Equality schemes.'

Transforming Health & Social Care

The Commission would wish to draw the attention of the Transformation Team to [our earlier consultation response in relation to: "Transforming Your Care: From Vision to Action"](#), shared with the Health and Social Care Board (HSC) Review Team in 2013, much of which we consider remains relevant to the current Hospitals Network consultation proposals

In our response to the public consultation on TYC, we welcomed the aspiration to make our health and social care system responsive to both the medium and future long term demands on health and social care, providing more local provision affordable and accessible to all.

We also welcomed the strong emphasis given to person-centred planning and decision making by service users in the development of personal care, health and social services provision.

We acknowledge the strong case put forward in the current framework consultation document for a long-term direction based on greater specialisation, Centres of Excellence and consolidation of services.

Many of the equality related themes and issues raised in the TYC consultation remain relevant and we particularly recommend that the Transformation Team give further consideration to the following issues:

- **Configuration of Acute Services:** Configuration of services should include an assessment of the extent to which localised services are accessible to traditionally excluded and marginalised groups e.g. disabled people, older people and ethnic minorities. zsx

Stakeholder engagement should be maximized using existing models where appropriate; include targeted efforts to engage with marginalised groups; and through increased representation of such groups in public life positions.

We welcome the commitments in the framework consultation document to the need to consider legal and ethical responsibilities to engage service users and stakeholders in the reconfiguration of service and to ensure that the voices of service users and their unpaid carers who are affected by that change continue to be reflected in the next phase of engagement and consultation.

The Commission recommends that service users be included in the proposed Oversight Board.

- **Affordable Accessible Transport:** The Commission believes that the availability of transport provision and the development of transport infrastructure should be a key consideration in respect of options for the provision of acute services and wider health and social care provision.

The Commission notes the Department's commitment in the framework consultation document to review the 2007 Transport Strategy for Health and Social Care services in Northern Ireland, which will include the criteria/assessment of need, promoting volunteer drivers, online non-emergency transport booking system and key performance indicators with performance management data.

The Commission notes the commitment to working across the NI Executive Departments to consider carefully the travel support available for our population.

However we recommend that the efficacy of this support, in meeting the needs of those without their own transport or who find public transport difficult to access (including because of poverty) or does not meet their needs, is kept under review, with ongoing monitoring of access for individuals belonging to vulnerable S75 categories such as people with disabilities, older people, lone parents etc.

Where adverse impact is identified, further consideration should be given to mitigating measures that can improve access to services and treatment for persons belonging to these groups.

- **Transition Planning for Community Health and Social Care:** The Commission would seek assurances that any transition to community-based health and social care services using the mixed economy model of private and

community/voluntary providers will not result in diminution of health and social care services.

Arrangements for transition to supported living arrangements in the community must take into account the specific needs of a range of equality groups.

The proposals need to take account of the Bamford Review of Mental Health and Learning Disability Services to ensure that transitional funding to deliver more services in the community does not take away from investment commitments in this area.

The proposals should also take into account changes to social security provision and any adverse impacts arising from the current welfare reform agenda, which are likely to lead to greater future demands on health and social care services.

- **Capacity Building:** The Commission considers commitments to provide capacity building on a cross-sectoral basis as particularly important given the intention to maintain and develop partnership-working between statutory agencies and the private, voluntary and community sectors. Capacity building should also be considered as a measure to inform and support the involvement of health service users in the decision-making framework.
- **Procurement and Social Clauses:** The Commission recommends that the proposals reflect strongly commitments to include social clauses in all appropriate public procurement exercises.
- **Proposed Investment Models:** The Commission advises that thorough consideration is given to the equality implications from both an employment and service delivery perspective when considering the use of Public Private Partnerships. It is important that equality considerations are given due weight in considering any future investment measures.

If you would like to discuss any aspect of this response in further detail, please do not hesitate to contact us.

Yours sincerely,



Brian Drury
Public Policy & Strategic Engagement
publicpolicy@equalityni.org