DHSS&PS

INFORMATION AND ANALYSIS UNIT

STATUTORY EQUALITY AGENDA INFORMATION BASE
FOR DHSS&PS AND HPSS: REVISED ACTION PLAN

APRIL 2001
INTRODUCTION

This draft Action Plan:

A. Briefly outlines eleven broad sets of actions to identify and address the information that is required to meet the statutory Equality duties of DHSS&PS and the HPSS; and

B. Summarises the action points in tabular form, with a note of the roles and detailed tasks, target dates and key groups and individuals involved in undertaking the actions.
A. ACTION POINTS

1. Information Needs Analysis

IAU to meet with Policy colleagues to further assess information requirements.

2. Establish Steering Group

A key step in the process is to establish an Equality Information Steering Group containing representatives of the Department, Equality Groups, Boards, Trusts and other relevant Agencies. The role of the Steering Group will be to oversee the whole project, agree the action plan, agree priorities etc.

3. Establish working Sub-Groups

Establish specific working groups, building on existing liaison arrangements where possible. Specific groups should be established for Hospital (including Mental Health) Information, Community/Children/PSS Information, Workforce and Family Practitioner Services (FPS) data held by the CSA. Groups will include information and IT staff from Trusts, Boards and the Department (including ITG/DIS) and representatives of Equality Groups. The role of the sub-groups will be to scope existing information, make recommendations on future developments, including commissioning research and surveys into identifying and addressing gaps in equality information. They will present these to the main Steering Group and oversee the implementation of new developments. Sub-groups will work closely with existing Liaison Groups where possible on the development and implementation of new requirements.
4. **Sub-groups to develop action plans**

Each Sub-Group will develop and agree with the Steering Group a specific plan of action to cover its area of responsibility.

5. **Expand data quality/availability assessment to cover all known systems and sources**

Develop the existing paper entitled DHSSPS & HPSS Statutory Equality Obligations - Information Requirements: Data Availability, Quality and Deficits to include the full range of HPSS and FPS systems. The wider assessment should examine the full range of IT systems and clerical systems in place within Trusts (mainly on the community/Children/PSS systems), Boards, the Child Health System and CSA and other agency systems. The review of population surveys, disease registries and relevant research projects also should be expanded as fully as possible.

6. **Develop plan to acquire access to existing available data**

Some of the information which will be required is currently available on systems to which we can gain access. Specific examples are Hospital waiting list information, Hospital outpatient information and A&E systems. Other data should be available from community systems including Soscare and Lcid. A range of information is also likely to be available from the CSA. Sub-groups should identify which of the available data is currently accessible, specify the full data requirement from each system, agree with DIS/ITG the necessary IT resources and a plan of work to secure access, provide the Steering Group with a report on the data to be accessed and costs, and agree a prioritised work programme to secure access, taking account of data confidentiality and data protection issues.

7. **Develop plan to acquire access to existing data, which cannot currently be accessed**
In addition to accessible information, other data is held within systems; this will require additional steps to make the data accessible. Specific examples include ethnicity on Hospital Systems and CSA data. A plan needs to be drawn up to make this information accessible. The plan should include costs and options for acquiring access.

8. **NISRA Developments**

Work with Demography and Methodology Branch in NI Statistics and Research Agency (NISRA) on creation of look-up codes/datasets to derive religion (and deprivation) based on post codes. Liaise with Central Survey Unit (CSU) in NISRA regarding full post-coding for all sample surveys.

9. **Develop and agree implementation plans**

The Steering Group will need to consider the work produced in the early stages by the Sub-Groups. The Sub-Groups will need to put forward a joint implementation plan to the Steering Group. The Steering Group will then need to agree overall the implementation plan, including priorities, time-scales and costs. The Steering Group will also need to consider the need for any additional resources, and how the work can be fully funded.

10. **Develop a plan to address remaining data gaps**

Sub-Groups will also need identify gaps which will continue to exist outside of the above projects. Sub-Groups will develop and agree with the Steering Group a longer term plan of action to address these gaps.
11. Implementation

Full implementation will involve close liaison with data holders (including Trusts and Boards) and others (eg Research and Development Office for the HPSS), specification of both data and IT requirements (including costs), securing resources to enable implementation (including probable bids for consultancy input), testing of systems, evaluation of data quality and developing an action plan with data holders to address data quality issues.
## B. OVERVIEW OF ACTION POINTS, ROLES/TASKS AND KEY INDIVIDUALS/GROUPS

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<th>Action Points</th>
<th>Roles/Detailed Tasks</th>
<th>Target Dates</th>
<th>Actors</th>
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</table>
| 1. Information needs analysis     | • Meet with DHSSPS and HPSS policy leads to further assess information requirements; and  
  • Liaise with Steering Group and Sub-Groups.                                      | Ongoing            | IAU and Sub-Groups                                          |
| 2. Establish Steering Group       | • Oversee the whole project.                                                          | February 2001      | Mr Hill, Dr McWhirter, DIS, Boards, Trusts, CSA             |
| 3. Establish working Sub-Groups   | • Scope existing information, identify gaps and weaknesses;                          | 16 April 2001      | RIB, PSAB, FPIRB (CSA)                                      |
|                                   | • Make recommendations on future developments to the main Steering Group, including identification of resource implications;  
  • Oversee the implementation of new developments; and  
  • Work closely with existing Liaison Groups on the development and implementation of new requirements/arrangements. |                    |                                                             |
<p>| 4. Sub-Groups develop Action Plans| • Develop specific Action Plan to cover each area of responsibility; and            | 9 May 2001         | Sub-groups                                                 |
|                                   | • Agree Action Plans with the Steering Group.                                         |                    |                                                             |</p>
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| **5. Expand data quality/availability assessment to cover all known systems** | • Assess availability and quality of equality group information on full range of IT and clerical systems in place within Trusts (mainly on the community/Children/PSS systems), Boards, the Child Health System and CSA systems.  
• Assess availability and quality of equality group information in existing population surveys, disease registries and research projects | 9 June 2001  
September 2001 | Sub-groups |
| **6. Develop plan to acquire access to existing available data** | • Identify which of the available data is currently accessible;  
• Specify the full data requirement from each system;  
• Agree with DIS/ITG the necessary IT resources and a plan of work to secure access; and  
• Provide the Steering Group with a report on the data to be accessed and costs. Agree a prioritised work programme to secure access with the Steering Group, taking account of data confidentiality and data protection issues. | 9 July 2001 | Sub-groups |
| **7. Develop plan to acquire access to existing data which cannot currently be** | • Identify which additional data could be made accessible;  
• Specify the full data requirement from each system;  
• Agree with DIS/ITG the necessary IT resources and a plan of work to secure access;  
• Provide the Steering Group with a report on the data to be accessed and costs. | 9 July 2001 | Sub-groups |
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<td>accessed and costs; and • Agree with the Steering Group a prioritised work programme to secure access.</td>
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<td>8. NISRA Developments</td>
<td>• Work with Demography and Methodology Branch in NI Statistics and Research Agency (NISRA) on creation of look-up codes/datasets to derive religion (and deprivation) based on post codes; and • Liaise with Central Survey Unit (CSU) in NISRA regarding full post-coding for all sample surveys.</td>
<td>Ongoing</td>
<td>IAU</td>
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<td>9. Develop and agree implementation plans</td>
<td>• Sub-groups submit a joint implementation plan to the Steering Group; • Steering Group agrees implementation plan; and • Steering Group considers the need for any additional resources and how the work can be fully funded.</td>
<td>End July, Early August</td>
<td>Sub-groups, Steering Group</td>
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<td>10. Develop a plan to address remaining data gaps</td>
<td>• Identify gaps which will continue to exist outside of the above projects; and • Develop and agree a longer term Action Plan to address these gaps.</td>
<td>Early October</td>
<td>Sub-groups, Steering Group</td>
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<td>11. Implementation</td>
<td>• Liaise with data holders (including Trusts and Boards); • Specify both data and IT requirements including costs; • Secure resources to enable implementation, including probable bids for consultancy input;</td>
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<td>Sub-groups, Trusts, Boards, Agencies</td>
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|               | • Develop and test the systems;  
|               | • Evaluate data quality; and  
|               | • Develop an Action Plan with data holders to address data quality issues. | DIS/ITG Steering Group |