

Equality and Disability Action Plan 2023-28

Date 30 June 2023

About us

We're RCOT, the Royal College of Occupational Therapists. We've championed the profession and the people behind it for over 80 years; and today, we are thriving with over 35,000 members. Then and now, we're here to help achieve life-changing breakthroughs for our members, for the people they support and for society as a whole.

Occupational therapy helps you live your best life at home, at work – and everywhere else. It's about being able to do the things you want and have to do. That could mean helping you overcome challenges learning at school, going to work, playing sport or simply doing the dishes. Everything is focused on increasing independence and wellbeing.

It's science-based, health and social care profession that's regulated by the Health and Care Professions Council.

An occupational therapist helps people of all ages overcome challenges completing everyday tasks or activities – what we call 'occupations'. Occupational therapists see beyond diagnoses and limitations to hopes and aspirations. They look at relationships between the activities you do every day – your occupations – alongside the challenges you face and your environment.

Then, they create a plan of goals and adjustments targeted at achieving a specific set of activities. The plan is practical, realistic, and personal to you as an individual, to help you achieve the breakthroughs you need to elevate your everyday life.

This support can give people a renewed sense of purpose. It can also open up new opportunities and change the way people feel about the future.

Our response

Thank you for the opportunity to respond to this suite of consultations. It was also helpful to have been able to attend one of the consultation events and be able to give some verbal feedback. As a general comment regarding the process, the presentation of the consultation has been somewhat unwieldy and as it is addressing equality, the ability to access so many reports and plans has been difficult, and some were not possible to obtain online.

Comments below are mainly to the Business Services organization and the Public Health Agency however some of the messaging will be applicable to for consideration to other plans.

Business Services Organization.

Participation of people with disabilities in public life

There is some positive work in BSO such as having the 17-disability awareness days and other awareness training mentioned, as well as contracted to organizations whose main aim is to integrate

disabled or disadvantaged people. It is good to note the development of Tapestry – the disability network for staff and the disability work placement scheme.

Disability Placement Scheme and support at work.

We would like to know if there is any involvement of occupational therapists in terms of supporting any of these schemes. There is more about Managing Well at Work on this link below, which is on the RCOT website. <https://www.rcot.co.uk/> (Scroll to the third item down)
<https://www.rcot.co.uk/promoting-occupational-therapy/occupational-therapy-posters-and-leaflets>

How much are schemes such as Access to Work or the Condition Management Programme in Northern Ireland utilised at BSO or in other organisations mentioned.

<https://www.nidirect.gov.uk/articles/condition-management-programme>

Overall staff retention

We note that 'on a general level, organisational change and staff turn-over can pose a big challenge' and wonder if there is data on staff turnover. Staff retention will have an impact on delivery of this plan. If organisation changes pose a challenge to BSO, what more concrete actions are being taken, so that reliance is not just on certain individuals, but adopted across the organisation for existing staff and new joiners. Are exit interviews happening, to better understand why staff are leaving.

Data Collection.

It is mentioned there are nine different equality groups that the law requires you to look at; that you have to follow the law under the Disability Discrimination (Northern Ireland) Order 2006 and that other pieces of legislation require you to develop an action plan: an Equality Action Plan and a Disability Action Plan. It is good to see more reference to other equality groups in the action plan going forward and the intention to develop a Section 75 profile of the workforce, as there is not much in the feedback report. Could there be more robust data collection going forward, as well as more specific actions. For example, '*a clear policy to be drawn up for people with caring responsibilities*', as a performance indicator.

We would like to see more actions that will be taken to address identified gaps in equality data. Equality in Participation in Public Life Policy Recommendations and in particular 'improving data collection and disaggregation'.ⁱ

Accessibility

Occupational therapy models and frameworks recognize that environmental factors are deeply important for the ability of individuals to participate in occupations.ⁱⁱ We cannot see much in this plan about 'physical' or 'environmental' accessibility to ensure no one is disadvantaged or disabled by the environment. The Disability Code of Practice says that 'The concept of discrimination in the Act reflects an understanding that it is often environmental factors (such as the structure of a building) or an employer's working practices, rather than limitations arising from a person's disability, which unnecessarily restrict a disabled person's ability to participate fully in society.'ⁱⁱⁱ

BSO and Recruitment

There is a particular issue for occupational therapists entering the HSC workforce and which BSO has responsibility, and it is known as the Regional Recruitment Process.

There is generally just one opportunity per year to go on this regional list. We have been told that this year there was very short notice for the applications, and the date was only released during Easter. This had an impact on applicants/universities in other parts of the UK, as people were on holiday and did not receive the information in sufficient time. A recent graduate told us that if you don't take up the first offer, you have only one more chance or your name is removed from the list. Other barriers are that the applicant must have a driving licence to go on the list but can there not be more pragmatic solutions as it is not always needed. We believe there is little transparency about the whole process. RCOT put in a Freedom of Information request asking several questions on the 14th of February 2023 and are still awaiting a response. We believe the process is inaccessible to all who would wish to apply and is not serving the trusts as required. We would welcome a review of this process.

Systemic issues relating to the length of time to be recruited into a post is also causing difficulty, including recruitment processes for people moving to Northern Ireland, which we are told are arduous and very lengthy. This is having an impact on services and filling vacancies. One member said she had to withdraw due to the time taken and not receiving information confirming a verbal offer. A subsequent application has taken 9 months to get into a post. Occupational therapists are a mainly female workforce. The effect of human resources and other organizational structures, processes and practices can impact on people with a disability and groups in the equality categories including gender equality.^{iv} We would ask that BSO look at recruitment as part of actions in these plans.

Public Health Agency.

It is good to see some clearer and specific actions in this plan including a specific action in relation to Allied Health Professions A recent 'Independent Review of Special Educational Needs Services and Processes (March 23)' includes that occupational therapy is one of the services which schools report their children and young people as requiring.

RCOT carried out a survey of occupational therapists across the UK and this included Northern Ireland^{vi}. We heard that as well as the increase in demand, 65% said that children and young people were presenting with more complex physical, mental health and learning needs. Additionally, 69% of occupational therapists said their teams were not fully staffed and 47% felt they were not able to provide the level or type of occupational therapy input that children and young people need. We would like to see how our key recommendations^{vii} can be integrated into the PHA action plan. More occupational therapists are needed so that children and young people have early access to services. Equipment and adaptation services require investment. BSO could also look at responsibilities in terms of timely recruitment as well as in relation to investment in equipment and adaptations.

The Public Health Agency could look at trends and plan for services for children with special educational needs. They need to improve data and identify children with SEN much earlier to improve forward planning in terms of what services, including sufficient staff and accommodation. Children with SEN need timely assessments and interventions. The need for further teacher training in relation to SEN is needed as well as accommodation for these classes.

It is very positive the PHA 'plan to create and promote opportunities for people with disabilities to participate in PHA's strategic planning process to ensure the needs of people with disabilities are appropriately reflected when setting commissioning priorities.' We hope that people in care homes and other hard to reach people are included in this. We are concerned that there should be equitable services generally. We have heard however, there are occupational therapists going into care homes in certain Trusts and to varying degrees in others (including not at all). Health inequalities and a postcode lottery of services need to stop, and services commissioned equitably across Northern Ireland, and this should be reflected here.

Whilst these specific points in this plan are welcome, it is difficult to get a sense of the breadth of issues at hand. We would like to see PHA develop clearer policies and a more encompassing approach in relation to people in equality categories and people with disabilities.

General Comments to all organisations.

Do you think that the actions we want to take will make a difference for people with a disability or in the equality category that they relate to? Please explain?

There is a general sense of organisations here laying out how they have fulfilled statutory equality and disability duties or intend to in an action plan, but is this sufficient? It is not clear from data as to what the previous actions have achieved or a sense of an overall strategy or direction. We would suggest that it may be worth considering a more transformative and complete change in culture which goes to the heart of the organisations and the work they do which will require a more strategic approach and include reviewing policies and processes.

RCOT is presently developing an 'equity, diversity and belonging strategy' (at consultation stage), and perhaps it may explain this point better. <https://www.rcot.co.uk/edb-strategy-consultation>

These are just 2 examples from a list of action examples, but all of the consultation may demonstrate that it is at an intrinsic level that equality and disability should be considered across all layers of the organizations and those they work for.

- *Understand what data we collect, why we collect it, and how we analyse, monitor and use the data.*
- *Review our policies and processes to ensure EDB sits at the heart of everything we do.*

<https://www.rcot.co.uk/equity-diversity-and-belonging-strategy-consultation/edb-action-examples>

Do you think we are focusing on the right actions? Please explain.

We would like to see something more substantial as above.

Do you have any suggestions for other actions to address the equality issues we have identified?

We do not particularly get a sense of equality issues that have been identified in some of these plans or do not provide clarity. In one plan, particular issues were identified for carers, however

there does not seem to be a baseline of any measurable data that could be compared from previous action plans.

Performance indicators and targets need to be clearer and specific, for example in one action plan it says in relation to Race Equality: 'All staff are trained and can demonstrate awareness through feedback and surveys.' What does the measurement of this look like?

We would suggest development of actions which gets to the heart of the organisations strategy, policies, processes and will have meaningful and measurable outcomes.

Do you think that the actions we want to take under our Disability Action Plan/ will make a difference for people with a disability? Please explain.

We would like to see more substance overall, and an understanding of the impact of Human Resources processes on equality categories and people with disabilities, in relation to recruitment and employment. Also, the impact to people receiving services who are impacted by recruitment processes (who are from an equality category or have a disability.)

We welcome the core regional leadership programme which ensures HSC leaders from Band 7 to director level are genuinely inclusive leaders through exploring barriers and recognising unique contributions made by staff with disabilities, or from equality categories. We would suggest more could be done to explicitly encourage disabled people into leadership positions.

Do you have any suggestions what else we could do?

The focus should be more substantial and far reaching and the actions, whilst many are positive, need to be part of a complete culture change. These are some of our suggestions.

- Develop clear policies and procedures as well as embed principles in strategy to develop a more encompassing approach to both the equality and disability legislation.
- Where it is applicable organisations can include modules in relation to staff education.
- Targets in relation to environmental accessibility as well as accessibility in other areas such as transport, communication, and technology.
- There needs to be more substance and an understanding of the impact of Human Resources processes on people in equality categories and people with disabilities in relation to workforce; and which also ultimately affect those people receiving services from those groups.
- A Review of Community Equipment and Assistive Technology Services is ongoing at present, we would suggest BSO has involvement with the Housing and Health Lead, Department of Health/Northern Ireland Housing Executive to consider the functions that are carried out by BSO or where they crossover.
- Look at the baseline of how many people with disabilities /equality categories are working in the organisations and set an ambitious target to employ more, including in leadership positions.
- Much better data collection and disaggregation and why it is collected and analyzed and what are the measurable outcomes of doing this.
- Ensure Tapestry/ Global Majority Community members, have a strong voice as people with disabilities or from equality categories and/or develop a forum which is given a clear position from leadership down.

- Regional equity in terms of service delivery
- Employ an occupational therapist or see how to access their knowledge and skills to see how to better support people with disabilities in the workplace.
- Have a language and terminology guide and limit the use of acronyms. This is in part an access issue, especially for neurodivergent people and acronyms aren't helpful, the terms may not be familiar to some people. Acronyms can create a 'language' that people can feel outside of.
- We would suggest that all the organisations have performance indicators that accurately measure whether they are meeting their targets for their Equality and Disability Action Plans

Contact

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References:

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- ⁱⁱⁱ Equality Commission (2005) Disability Code of Practice
<https://www.equalityni.org/ECNI/media/ECNI/Publications/Employers%20and%20Service%20Providers/DisabilityEmploymentCoPupdatedMay13.pdf>
- ^{iv} Stamarski C.S., Son Hing L.S. (2015). Gender inequalities in the workplace: the effects of organizational structures, processes, practices and decision makers' sexism. *Frontiers in Psychology*. 2015;6(1400):1-20. doi:10.3389/fpsyg.2015.01400
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4584998/>
- ^v Department of Education (2023) Independent Review of Special Educational Needs Services and Processes
<https://www.education-ni.gov.uk/sites/default/files/publications/education/SEN%20Review%20Report%20For%20Publication%2023%20May%202023.pdf>
- ^{vi} The number of pupils with a statement of Special Educational Needs (SEN) has increased steadily over the past number of years and that in 2021/22 there were 21,956 (6.4%) children on stage 3 of the SEN register compared to 17,709 (5.4%) in 2017/18.
- ^{vii} RCOT (2022) Children's access to occupational therapy
2022file:///C:/Users/user%202/Downloads/Childrens%20access%20to%20occupational%20therapy%202022%20(1).pdf