



Health and Safety Policy

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Policy Author	Rory Donnelly		
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Version Number	Review Date	By Whom	Amendments
Version 1.0	February 2015	R Hall / E Girvan	Nil
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Version 3.0	February 2020	R Donnelly	Reflective of ISO 45001

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1.0 INTRODUCTION

- 1.1 The health and safety policy is the starting point for the process of managing health and safety successfully across all the diverse range of services that Mid Ulster District Council delivers to the public.
- 1.2 Under the Health and Safety at Work (Northern Ireland) Order 1978 Mid Ulster District Council must take action to ensure that its activities do not harm the health or safety of its employees or anybody else and prepare a written statement saying how they will achieve this, keep it up to date and bring the latest version to the attention of all employees.
- 1.3 Mid Ulster District Council has prepared a written statement of its health and safety policy, signed by the Chief Executive and will ensure that this is brought to the attention of its employees.
- 1.4 This policy will be supported by procedural documents where the complexity of the issue makes it necessary.
- 1.5 This policy has been designed to meet legal requirements which Mid Ulster District Council recognises as the minimum standard to be achieved, and to provide the foundation for achieving continuous improvement in Health and Safety performance.

2.0 POLICY AIMS AND OBJECTIVES

- 2.1 The aims of this policy are to:
 - Demonstrate that Mid Ulster District Council is committed to addressing its health and safety obligations.
 - Provide and maintain a safe working environment for employees and the wider community in which they interact.
 - Provide a framework for health and safety management at all levels which adopts and supports best practice.
 - Comply with, and where practicable exceed, the requirements and targets set by existing health and safety legislation.

3.0 POLICY SCOPE

- 3.1 The scope of the policy extends to all those employed by Mid Ulster District Council, and to those contractors and public under our management or control.

4.0 POLICY STATEMENT:

4.1 Health and Safety Policy Statement

The Council recognises the inherent need to apply structured risk assessments, management and control procedures to address potential health and safety hazards arising from its day to day work activities.

Mid Ulster District Council is committed to ensuring, so far as is reasonably practicable, the health, safety and welfare of all its employees and of any others who may be affected by Council undertakings in accordance with best practice. To fulfil this commitment, Council will:

- Provide safe and healthy working conditions to prevent work related injuries and ill health to employees, contractors and members of the public, so far as is reasonably practicable, through:
 - Arrangements for the safe use, handling, storage and transport of articles, materials and substances.
 - Safe plant, equipment and systems of work.
 - Information, instruction, training and supervision as is necessary.
 - A work environment that is safe, without risks to health, with facilities and arrangements that are adequate for the welfare of those persons using the premises.
- Prioritise Health and Safety as a key objective within all departments and services
- Comply with all legislation and other regulatory standards that apply within Council
- Eliminate hazards and reduce occupational health & safety risks that arise from work activities, so far as reasonable practicable
- Continually seek to improve Health and Safety performance across all departments
- Ensure that employees have sufficient knowledge, skills and capability to safely carry out their duties.
- Encourage employees to take responsibility for their own individual health and safety performance
- Appoint competent health and safety personnel to assist management in implementing the Health and Safety Policy.
- Keep this Policy and its arrangements for implementation under review and where necessary, revise to ensure it remains appropriate to the Council.

Council commits to providing human, physical and financial resources and suitable information to achieve the requirements of this policy.

Council will establish and maintain a Health and Safety committee to actively encourage consultation between management, trade union safety representatives and other employees to assist in the implementation of the Health and Safety Policy and management system where accredited.

This policy will be communicated to all employees across Council and made available to all interested parties upon request

4.2 Health and Safety Organisation

Whilst overall responsibility for health and safety rests with the Chief Executive, the Nominated Director has overall responsibility for formulating and revising the Health and Safety Policy. This policy is reviewed annually. The Chief Executive and the Nominated Director will be supported in achieving their responsibilities by the Corporate Health and Safety Team.

4.3 Health and Safety Arrangements

This health and safety policy statement is supplemented by specific responsibilities, policies, procedures and training courses as are required to address the practical implementation of these policy commitments in the various workplaces and work activities.

All relevant documents will be held within the Health, Safety and Wellbeing folder which is available through the Council's intranet. The documents will be revised as and when required, with any such revisions being communicated to affected staff.

Chief Executive _____ Date _____

Council Chair _____ Date _____

5.0 LINKAGE TO CORPORATE PLAN

- 5.1 This Health and Safety Policy is consistent with Mid Ulster District Councils corporate priorities. It contributes to the performance theme of service delivery and provides the framework and system to facilitate the safe delivery of services.

6.0 ROLES AND RESPONSIBILITIES

6.1 Elected Members

Mid Ulster District Council Elected Members have a collective responsibility to provide leadership and direction and for ensuring that health and safety arrangements are effective and managed appropriately.

The goal of effective management of health and safety is more easily achieved where Elected Members understand the risks, the systems in place for managing those risks and an appreciation of the causes of failure.

Elected Members will:

- Ensure that adequate consideration is given to health and safety implications when making Council decisions.
- Allocate sufficient resources to enable the Health and Safety Policy to be implemented in full and discharge the Council's health and safety responsibilities.
- Monitor the overall performance of the Council's health and safety management system.
- Through the Policy and Resources Committee make recommendations as appropriate to Council as regards fulfilling health and safety objectives.

6.2 Chief Executive

The Chief Executive is at the top of the organisational structure and has overall executive responsibility for the health and safety at work of Mid Ulster Council employees, contractors, visitors and members of the public.

The Chief Executive is directly responsible to Council. In relation to health and safety he will:

- Endorse the Mid Ulster District Council health and safety policy statement.
- Support elected members in meeting their health and safety responsibilities.
- Report to the Council on the effectiveness of the policy and the health and safety management system.
- Ensure that there is an effective policy and management system for the management of health, safety and welfare within the Council.

- Demonstrate active and strong leadership in creating a positive health and safety culture.
- Appoint a Director with strategic responsibility for health and safety to be specifically responsible for the implementation and monitoring of health, safety and welfare matters.
- Appoint a competent person or persons to advise the Council on health, safety and welfare matters.
- Ensure that responsibilities are clearly defined, properly assigned and correctly discharged at all levels.
- Ensure that suitable resources are made available to meet the requirements of the policy as far as is reasonably practicable.
- Ensure that there are objective targets set for the improvement of health, safety and welfare.
- Ensure that the health and safety policy is reviewed periodically and updated where necessary.

6.3 Nominated Director

The nominated Director will have strategic responsibility for:

- Co-ordinating the Councils activities with regards to health and safety.
- Taking a leadership role to ensure full compliance with statutory requirements, so far as is reasonably practicable.
- Advising the Council on the requirements and application of resources to achieve compliance with the policy.

6.4 Directors

Directors will take the initiative in promoting and monitoring the health and safety of all persons liable to be affected by activities under their control and in establishing within their Department a culture of safe working practice. They are responsible for ensuring that sufficient risk assessments are carried out and ensuring that suitable measures are identified and implemented to manage and control risks.

They will:

- Demonstrate a high personal standard of health and safety.
- Ensure that the Council Health and Safety Policy and management systems are implemented, and staff under their control, are fully aware of their responsibilities as regards the health and safety of all Council employees and others who may be affected by the Councils operations.
- Ensure that there is a system in place to ensure all levels of employees are competent to perform their duties and have received adequate and suitable training in health and safety management and safe working practices.
- Ensure that appropriate arrangements are in place for the communication of health and safety issues to all employees, contractors and visitors.
- Ensure Departmental annual health and safety objectives and targets are set and regularly reviewed.

- Co-operate with health and safety investigations, monitoring and auditing.
- Ensure adequate resources and finances are available to achieve the health and safety standards required of the Council Health, and Safety Policy and procedures.
- Liaise with the Corporate Health and Safety Officer on health, safety and welfare matters.

6.5 Heads of Service

Heads of Service will ensure:

- They set a personal example by following any instructions and rules and by wearing the correct PPE.
- Staff under their control are aware of and follow health, safety and welfare procedures and instructions
- Staff under their control have been briefed on their health, safety and welfare responsibilities
- Suitable and sufficient risk assessments have been carried out and any control measures resulting from the assessments are implemented
- All work, including visits to sites, is adequately planned and controlled and appropriate information and instruction is provided to staff prior to commencing work
- Staff are provided with appropriate PPE and safety equipment for the project
- Specific health and safety training needs are identified and appropriate training provided
- Adequate and responsible supervision is provided to reflect the degree of risk with special attention paid to vulnerable members of staff
- All incidents are reported and investigated according to the incident and accident reporting and investigation procedure and any resulting actions to prevent recurrence are carried out.
- Where contractors are employed that their health and safety performance is assessed prior to selection and subsequently monitored and reviewed.
- They are fully aware of the Health and Safety Policy and the procedures which are relevant to their area of responsibility and know the requirements of health and safety legislation relevant to the activities under their control.
- They liaise with the Corporate Health and Safety Officer on health, safety and welfare matters.

6.6 Line Managers/Supervisors

All Line Managers/Supervisors are responsible for the implementation of the Health and Safety Policy in their area of control. Line Managers/Supervisors will ensure:

- They keep up to-date with the Health and Safety Policy and procedures relevant industry best practice, legislation and guidance relevant to their area of activity.
- They set a personal example by following any instructions and rules and by wearing the correct PPE
- Staff under their control are aware of and understand relevant procedures and instructions
- All relevant health and safety information is communicated effectively to their staff and contractors under their control.
- Health and safety training and development needs of staff are identified and appropriate training provided.
- Risk assessments are carried out in their area of control and identified control measures recorded.
- Employees' health and safety wellbeing performance is monitored and action taken when standards fall below acceptable
- All incidents are reported and investigated according to the Council incident and accident reporting and investigation procedure and resulting actions to prevent recurrence are carried out
- They liaise with the Corporate Health and Safety Officer on health, safety and welfare matters within their area of responsibility

6.7 Facility Managers

Facility Managers who are responsible for Council building premises have specific responsibilities as regard health and safety. Facilities Managers duties will include the following:

- Ensuring premises general risk assessments are in place and reviewed on at least an annual basis.
- Ensuring health and safety information is communicated effectively with those who use the premises
- Ensuring that control, monitoring and inspections regimes exist as regards asbestos, legionella, fire, electricity, hazardous substances, lifting equipment, gas
- Ensuring adequate First Aid arrangements are in place.
- Ensuring that all new staff are provided with a local induction, informing them of emergency evacuation arrangements and that adequate welfare facilities are provided.
- Ensuring adequate arrangements are in place for contractor and visitor sign in/out and supervision of contractors and visitors whilst on premises
- The reporting and investigation of accidents or incidents involving injury or damage to determine the causes and take appropriate action.

6.8 All Staff

Everybody has responsibility for their own health and safety and that of others who may be affected by their acts or omissions. In addition employees may be given specific health, safety and wellbeing related roles or responsibilities. These may be detailed in other Council related policies or job descriptions. Failure to comply or to co-operate with any health and safety measures required by the Council may lead to disciplinary action being taken.

All employees are responsible for:

- Looking after their own work-related health, safety and wellbeing and the safety of others affected by their work activities.
- Treating each employee with dignity and respect as an individual
- Co-operating with the Council by following safe working practices and carrying out their health, safety and wellbeing responsibilities as detailed in this and other Council related policies and procedures
- Using correctly any work equipment provided in accordance with the instruction and training received
- Not misusing or interfering with anything provided in the interest of health and safety
- Taking reasonable care of any personal protective equipment (PPE) provided and reporting any faults immediately
- Reporting any incidents promptly to line manager
- Seeking advice if they do not feel competent to carry out their responsibilities
- Accepting opportunities for occupational health review or counselling when recommended.

6.9 Corporate Health and Safety Officer

The Corporate Health and Safety Officer is the nominated competent person to provide health and safety assistance as required by Regulation 7 of The Management of Health and Safety at Work Regulations (Northern Ireland) 2000 and will:

- Advise the Chief Executive, Directors and others on health and safety matters.
- Co-ordinate the implementation and maintenance of the health and safety management systems used by Mid Ulster District Council.
- Develop and keep under review Council-wide health and safety policies and advise Safety Representatives on the development of health and safety procedures.
- Keep up to date with legislation and other requirements and advise Council personnel on the requirements in order to ensure full compliance.
- Support the Council's governance processes by advising on the Council's health and safety risk profile, establishing systems for the monitoring and review of health and safety performance and delivering a programme of health and safety audits.

- Provide advice on health and safety competence and capability, and organisational training and development needs.
- Provide regular updates on the performance of the health and safety management system.
- Develop and maintain health and safety communications on new developments, performance, and incident reports.
- Develop an effective system for reporting, investigation and corrective action for all incidents and work related ill health cases and monitor its implementation.
- Liaise with the regulatory authorities and other external interested parties.
- Act to promote a positive health and safety culture.

6.10 Safety Representatives

Safety Representatives appointed under the Safety Representatives and Safety Committees Regulations (Northern Ireland) 1979 or the Health and Safety (Consultation with Employee Regulations) 1996, amongst other things, have the following range of functions:

- Investigation of accidents, complaints by an employee, hazards etc. and the examination of the causes of accidents at the work place.
- Making representation to the employer on the above investigations, and on general matters affecting the health and safety of employees they represent.
- Inspecting the workplace as regards health, safety and welfare issues.
- Representing employees at discussions with inspectors of the Health and Safety Executive Northern Ireland and receiving such information from such inspectors.
- Attending safety committee meetings and assisting in developing effective health and safety communication to all employees.
- Making representations to the employers.
- Carrying out inspections of the workplace.

6.11 Health and Safety Committee

The Health and Safety Committee is a consultative committee responsible for promoting a healthy and safe working environment for all employees of the Council making recommendations to senior management for the protection of any person from risk to health or safety arising from activities carried out by the Mid Ulster District Council.

The Committee will:

- Advise and assist the Council and its Management team with the formulation of effective health and safety arrangements to enable the Council to comply with legislation and to enable all employees to be represented on matters involving health and safety at work.
- Assist with the development of health, safety and wellbeing policies and procedures.

- Review health, safety and wellbeing performance and make recommendations for improvement to management.

(N.B. the terms of reference of the Corporate Health and Safety Committee are attached as Appendix A)

7.0 PROCEDURE AND IMPLEMENTATION

7.1 The Health and Safety policy is supported and supplemented by a suite of specific procedures, guidance notes and codes of practice. These will be developed and published on the Mid Ulster District Council Intranet and made available to all employees.

Procedures will include:

- Accident Reporting and Investigation Procedure
- General Risk Assessment Procedure
- Control of Substances Hazardous to Health (COSHH) Procedure
- Display Screen Equipment Procedure
- Safer Manual Handling Procedure
- Dangerous Substance and Explosive Atmospheres Procedure
- Electricity at Work Procedure
- Working at Heights Procedure
- The Management of Asbestos Procedure
- The Management of Contractors Procedure
- Fire Procedure
- Legionella

7.2 Forms supporting this policy and associated procedures will be developed and published on the Corporate Health and Safety Mid Ulster District Council Intranet and made available to all staff.

8.0 IMPACT ASSESSMENT

8.1 This policy has been “screened out” for equality impact assessment.

8.2 Mid Ulster District Council has a statutory duty to comply with health and safety legislation and is required to do as much as is reasonably practicable to protect the health and safety of its own employees and anyone else who could be affected by its activities. It is essential that sufficient financial investment and resources are made available to achieve compliance with the law.

9.0 SUPPORT AND ADVICE

9.1 Support and advice on this policy can be obtained from the Corporate Health and Safety Officer.

10.0 COMMUNICATION

- 10.1 A master electronic controlled copy of this policy will be kept up-to-date on the website.
- 10.2 The signed policy statement will be displayed on notice boards across Council facilities.

11.0 MONITORING AND REVIEW ARRANGEMENTS

- 11.1 The Health and Safety policy will be reviewed annually thereafter.
- 11.2 The Health and Safety Committee will, with the co-operation of the relevant Directors review the programme of safety audits conducted by the Corporate Health and Safety Officer on a regular basis. Audits will assess whether the policy and procedures have been implemented effectively.
- 11.3 The Corporate Health and Safety Officer shall ensure that issues that arise from such audits are recorded and management informed. The nominated Director will review audit reports and ensure compliance with recommended actions.

APPENDIX A:

HEALTH AND SAFETY COMMITTEE TERMS OF REFERENCE:

1.0 Purpose

The purpose of the Health and Safety Committee is to assist the Chief Executive in the discharge of his health and safety responsibilities.

2.0 Responsibilities

The Committee is a consultative committee with responsibility for promoting a healthy and safe working environment for all employees of the Council making recommendations to senior management of Mid Ulster District Council.

The Committee will deliver but not be limited by the following responsibilities:

- Advise and assist the Council and its Management team with the formulation of effective health and safety arrangements to enable the Council to comply with legislation and to enable all employees to be represented on matters involving health and safety at work.
- Assist with the development of health and safety policies and procedures.
- Review health and safety performance against targets and make recommendations for improvement to management.
- Review all reportable accidents and Incidents making recommendations to prevent recurrence.

3.0 Composition:

Chair:	Nominated Director
Secretariat:	Through Nominated Director
Members	Director of Public Health and Infrastructure Director of Organisational Development Director of Business and Communities Director of Arts and Leisure Director of Environment and Property Corporate Health and Safety Officer 2 x Safety Reps from Recognised Trade Unions

4.0 Frequency of Meetings

The Committee will normally meet quarterly.



Equality & Good Relations Screening Report

Introduction

Mid Ulster District Council has a statutory duty to screen its policies, procedures, practices/decisions. This Policy Screening Form and Report assists Council Departments to consider the likely equality and good relations impacts of the aforementioned, if any, placed upon our ratepayers, citizens, service users, staff and visitors to the district.

Section 1 – Policy scoping

This asks the Policy Author to provide details on the policy, procedure, practice and/or decision being screened and what available evidence you have gathered to help make an assessment of the likely impact on equality of opportunity and good relations. Reference to policy within this document refers to either of the aforementioned (policy, procedure, practice, and/ or decision).

Section 2 – Screening questions

This asks about the extent of the likely impact of the policy on groups of people within each of the Section 75 categories. Details of the groups consulted and the level of assessment of the likely impact. This includes consideration of multiple identity and issues.

Section 3 – Screening decision

This guides the Council to reach a screening decision as to whether or not there is a need to carry out an equality impact assessment (EQIA), or introduce measures to mitigate the likely impact, or the introduction of an alternative policy to better promote equality of opportunity.

Section 4 – Monitoring

This provides guidance to the Council on monitoring for adverse impact and broader monitoring.

Section 5 – Approval and authorisation

This verifies the Council's approval of a screening decision by a senior manager responsible for the policy.

Appendix A

Screening Process

Section 1 Policy Scoping & Information

The first stage of the screening process involves scoping the policy under consideration which sets the context and confirms the aims and objectives for the policy being screened. Scoping the policy helps to identify constraints as well as opportunities and will help the policy author to work through the screening process on a step by step basis.

1. Policy Name		
Mid Ulster District Council Health and Safety Policy		
2. Is this an existing, revised or a new policy?		
This is a revised policy to take account of requirements ISO45001.		
3. What is it trying to achieve? (aims/outcomes)		
The aim of this policy is to outline the Council's commitment to compliance with statutory health and safety at work legislation and the Council has arrangements in place to ensure this occurs consistently across the council structure and organisation.		
4. Are there any Section 75 categories which might be expected to benefit from the intended policy?	Yes	
	No	
None directly anticipated.		
6. Who initiated or wrote the policy?		
Rory Donnelly, Corporate Health and Safety Manager		
7. Who owns and who implements the policy?		
Body Corporate (Mid Ulster District Council) as advised by the Chief Executive and delegated through the Council structure.		

Implementation factors

		Yes	No
Are there any factors which could contribute to/ detract from intended aim/ outcome of the policy?		Yes	
<ul style="list-style-type: none"> If yes, are they financial? 		x	
<ul style="list-style-type: none"> If yes, are they legislative? 			No
<ul style="list-style-type: none"> If yes, Please specify 	Financial: if insufficient funds are not made available by the Council Legislative: not applicable		
<ul style="list-style-type: none"> Other, Please specify 			

Stakeholders

The internal and external (actual or potential) that the policy will be impacted upon

	Yes	No
Staff	x	
Service Users	x	
Other public sector organisations	x	
Voluntary/community/ trade unions	x	
Other, please specify		

Others policies with a bearing on this policy

Policies	Owners
Corporate Risk Policy	Director of Finance & IT

Available evidence

Information and available evidence (qualitative and quantitative) gathered to inform the policy under each of the Section 75 groups as identified within the Northern Ireland Act 1998.

Section 75 category	Details of evidence/information																																				
Religious belief	<p>63.77% of the population were brought up in the Catholic religion and 33.46% belong or were brought up in a Protestant and Other Christian (including Christian related) religion. Other religions comprised 690 (0.5%) and None 3,153 (2.28%) of the population (Source: 2011 Census).</p> <table><tr><th>Religion or Religion brought up in</th><th>No.</th><th>%</th></tr><tr><td>Catholic</td><td>88,375</td><td>63.77</td></tr><tr><td>Protestant and Other Christian (including Christian related)</td><td>46,372</td><td>33.46</td></tr><tr><td>Other religions</td><td>690</td><td>0.5</td></tr><tr><td>None</td><td>3,153</td><td>2.28</td></tr><tr><td>Total</td><td>138,590</td><td>100</td></tr></table>	Religion or Religion brought up in	No.	%	Catholic	88,375	63.77	Protestant and Other Christian (including Christian related)	46,372	33.46	Other religions	690	0.5	None	3,153	2.28	Total	138,590	100																		
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Political opinion	<p>Political party representation can be used as an approximate barometer of political opinion of people within Mid Ulster council area. The most recent local government/ council election in 2014 the percentage 1st preference vote share for each of the political party/ independents is detailed bellowed along with representation (seats) on Council (Source: NISRA):</p> <table><tr><th>Party</th><th>Votes</th><th>Percentage</th><th>Council Seats</th></tr><tr><td>SF</td><td>22,587</td><td>41.0%</td><td>18</td></tr><tr><td>DUP</td><td>9,723</td><td>17.6%</td><td>8</td></tr><tr><td>UUP</td><td>9,573</td><td>17.4%</td><td>7</td></tr><tr><td>SDLP</td><td>7,600</td><td>13.8%</td><td>6</td></tr><tr><td>Independent</td><td>2,689</td><td>4.9%</td><td>1</td></tr><tr><td>TUV</td><td>2,380</td><td>4.3%</td><td>0</td></tr><tr><td>Alliance</td><td>250</td><td>0.6%</td><td>0</td></tr><tr><td>UKIP</td><td>195</td><td>0.4%</td><td>0</td></tr></table>	Party	Votes	Percentage	Council Seats	SF	22,587	41.0%	18	DUP	9,723	17.6%	8	UUP	9,573	17.4%	7	SDLP	7,600	13.8%	6	Independent	2,689	4.9%	1	TUV	2,380	4.3%	0	Alliance	250	0.6%	0	UKIP	195	0.4%	0
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Racial group	<p>According to the 2011 Census the overwhelming majority of the population 136,485 (98.48%) were classified as ‘white’. Within this total will be migrant communities, such as Polish, Lithuanian and so forth. Statistics indicate that the number of people in Mid Ulster Local Government District (LGD) born outside Northern Ireland is:</p> <table><tr><th>Place of Birth</th><th>No.</th></tr><tr><td>Great Britain</td><td>4,053</td></tr><tr><td>Republic of Ireland</td><td>2,250</td></tr><tr><td>EU Countries (Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland, Slovakia and Slovenia)</td><td>6,795</td></tr><tr><td>Other</td><td>2,280</td></tr></table>	Place of Birth	No.	Great Britain	4,053	Republic of Ireland	2,250	EU Countries (Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland, Slovakia and Slovenia)	6,795	Other	2,280																										
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	<p>The minority ethnic language profile within the area can serve as a possible indicator of the Black & Minority Ethnic (BME) community profile within the district. The composition of language groups in Mid Ulster LGD area is also noted from the 2011 census by NISRA as:</p> <table><tr><th>Main Languages of residents in Mid Ulster Council area</th><th>No.</th></tr><tr><td>English</td><td>125,715</td></tr><tr><td>Polish</td><td>2,008</td></tr><tr><td>Lithuanian</td><td>2,039</td></tr><tr><td>Portuguese</td><td>903</td></tr><tr><td>Irish (Gaelic)</td><td>404</td></tr><tr><td>Slovak</td><td>477</td></tr><tr><td>Russian</td><td>297</td></tr><tr><td>Latvia</td><td>261</td></tr><tr><td>Hungarian</td><td>117</td></tr><tr><td>Chinese</td><td>64</td></tr><tr><td>Tagalog/Filipino</td><td>38</td></tr><tr><td>Malaysian</td><td>33</td></tr><tr><td>Other</td><td>922</td></tr></table>	Main Languages of residents in Mid Ulster Council area	No.	English	125,715	Polish	2,008	Lithuanian	2,039	Portuguese	903	Irish (Gaelic)	404	Slovak	477	Russian	297	Latvia	261	Hungarian	117	Chinese	64	Tagalog/Filipino	38	Malaysian	33	Other	922
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Malaysian	33																												
Other	922																												
Age	<p>The age profile of Mid Ulster Local Government District area as at 2015 (Source, NISRA)</p> <table><tr><th></th><th>Mid Ulster</th><th>Northern Ireland</th></tr><tr><td>Total Population</td><td>144,002</td><td>1,851,621</td></tr><tr><td></td><td></td><td></td></tr><tr><td>0-15 years</td><td>33,123</td><td>385,200</td></tr><tr><td>16-39 years</td><td>47,646</td><td>583,116</td></tr><tr><td>40-64 years</td><td>43,621</td><td>591,481</td></tr><tr><td>65+ years</td><td>19,612</td><td>291,824</td></tr><tr><td></td><td></td><td></td></tr><tr><td>Population Change % (2005-2015)</td><td>15.3%</td><td>7.2%</td></tr></table>		Mid Ulster	Northern Ireland	Total Population	144,002	1,851,621				0-15 years	33,123	385,200	16-39 years	47,646	583,116	40-64 years	43,621	591,481	65+ years	19,612	291,824				Population Change % (2005-2015)	15.3%	7.2%	
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Population Change % (2005-2015)	15.3%	7.2%																											

Marital status	The below table sets out the marital status profile for Mid Ulster District Council area as extracted from results of the 2011 Census																																																					
		Mid Ulster		Northern Ireland																																																		
		No.	%	No	%																																																	
	Single (never married or never registered a same sex civil partnership) (Aged 16+)	38,353	35.97	517,393	36.14																																																	
	Married (Aged 16+)	54,192	50.82	680,831	47.56																																																	
	In a registered same sex civil partnership (Aged 16+)	62	0.06	1,243	0.09																																																	
	Separated (but is still legally married or still legally in a same sex civil partnership) (Aged 16+)	3,369	3.16	56,911	3.98																																																	
	Divorced or formerly in a same sex civil partnership which is now legally dissolved (Aged 16+)	4,139	3.88	78,074	5.45																																																	
	Widowed or surviving partner from a same sex civil partnership (Aged 16+)	6,523	6.12	97,088	6.78																																																	
Sexual orientation	No specific statistics are available from the 2011 government census for this Category and there are therefore no official statistics available in relation to persons of different sexual orientation. However, the Integrated Household Survey would include between 3% and 4% would be either gay, lesbian and/or bisexual. However, due to the nature of 'disclosure' in this area, umbrella organisations often state that the figure may be closer to 10%.																																																					
	<table><tr><td>Region</td><td>Heterosexual / Straight</td><td>Gay/ Lesbian</td><td>Bisexual</td><td>Gay/ Lesbian/ Bisexual</td><td>Other</td><td>Don't know /refuse</td><td>No response</td></tr><tr><td>England</td><td>92.54%</td><td>1.10%</td><td>0.51%</td><td>1.61%</td><td>0.33%</td><td>4.07%</td><td>1.45%</td></tr><tr><td>Wales</td><td>93.93%</td><td>1.04%</td><td>0.48%</td><td>1.52%</td><td>0.45%</td><td>2.99%</td><td>1.11%</td></tr><tr><td>Scotland</td><td>94.65%</td><td>0.82%</td><td>0.33%</td><td>1.14%</td><td>0.26%</td><td>2.59%</td><td>1.37%</td></tr><tr><td>N Ireland</td><td>93.00%</td><td>0.64%</td><td>0.96%</td><td>1.60%</td><td>0.26%</td><td>3.98%</td><td>1.17%</td></tr><tr><td>Total</td><td>92.80%</td><td>1.06%</td><td>0.51%</td><td>1.57%</td><td>0.32%</td><td>3.89%</td><td>1.42%</td></tr></table>							Region	Heterosexual / Straight	Gay/ Lesbian	Bisexual	Gay/ Lesbian/ Bisexual	Other	Don't know /refuse	No response	England	92.54%	1.10%	0.51%	1.61%	0.33%	4.07%	1.45%	Wales	93.93%	1.04%	0.48%	1.52%	0.45%	2.99%	1.11%	Scotland	94.65%	0.82%	0.33%	1.14%	0.26%	2.59%	1.37%	N Ireland	93.00%	0.64%	0.96%	1.60%	0.26%	3.98%	1.17%	Total	92.80%	1.06%	0.51%	1.57%	0.32%	3.89%
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Total	92.80%	1.06%	0.51%	1.57%	0.32%	3.89%	1.42%																																															
Research also conducted by the HM Treasury shows that between 5%-7% of the UK population identify themselves as gay, lesbian, bisexual or 'trans' (transsexual, transgendered and transvestite) (LGBT).																																																						

Men & women generally	<p>The gender profile of Mid Ulster LGD is detailed as;</p> <table><tr><th></th><th colspan="2">Mid Ulster</th><th colspan="2">Northern Ireland</th></tr><tr><th></th><th>No.</th><th>%</th><th>No.</th><th>%</th></tr><tr><td>Male</td><td>69,362</td><td>50.05</td><td>887,323</td><td>49.00</td></tr><tr><td>Female</td><td>69,228</td><td>49.95</td><td>923,540</td><td>51.00</td></tr></table>		Mid Ulster		Northern Ireland			No.	%	No.	%	Male	69,362	50.05	887,323	49.00	Female	69,228	49.95	923,540	51.00					
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Male	69,362	50.05	887,323	49.00																						
Female	69,228	49.95	923,540	51.00																						
Disability	<p>According to the 2011 NISRA census statistics 19.39% of people had a long-term health problem or disability that limited their day-to-day activities whilst 80.43% of people within the district stated their general health was either good or very good</p> <table><tr><th></th><th colspan="2">Mid Ulster</th><th colspan="2">Northern Ireland</th></tr><tr><th></th><th>No.</th><th>%</th><th>No.</th><th>%</th></tr><tr><td>Disability / long term health</td><td>26,870</td><td>19.39</td><td>374,646</td><td>20.69</td></tr><tr><td>No disability / long term health problem</td><td>111,720</td><td>80.61</td><td>1,436,217</td><td>79.31</td></tr></table> <p>In Northern Ireland the profile of persons with a disability has been reported by Disability Action as;</p> <ul style="list-style-type: none">• More than 1 in 5 or 21% of the population have a disability• 1 in 7 people have some form of hearing loss• 5,000 persons use sign language - British Sign Language and/or Irish Sign Language• There are 57,000 blind persons or persons with significant impairment• 52,000 persons with learning difficulties		Mid Ulster		Northern Ireland			No.	%	No.	%	Disability / long term health	26,870	19.39	374,646	20.69	No disability / long term health problem	111,720	80.61	1,436,217	79.31					
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Dependants	<p>Persons with dependents may be people who have personal responsibility for the care of a child (or children), a person with a disability, and/ or a dependent older person. The below table provides a summary with respect Mid Ulster LGD.</p> <table><tr><th></th><th colspan="2">Mid Ulster</th><th colspan="2">Northern Ireland</th></tr><tr><th></th><th>No.</th><th>%</th><th>No.</th><th>%</th></tr><tr><td>Households with dependent children</td><td>18,626</td><td>38.99</td><td>238,094</td><td>33.86</td></tr><tr><td>Lone parent households with dependents</td><td>3,485</td><td>7.30</td><td>63,921</td><td>9.09</td></tr><tr><td>People providing unpaid care</td><td>12,821</td><td>10.69</td><td>231,980</td><td>11.82</td></tr></table> <p>Of the households in Mid Ulster Local Government District with dependent children, they can be summarised as;</p> <ul style="list-style-type: none">• 7,407 families in households have 1 dependent child• 6,394 families in households with two dependent children• 5,014 families in households with three dependent children <p>There are 37,306 dependent children within families.</p>		Mid Ulster		Northern Ireland			No.	%	No.	%	Households with dependent children	18,626	38.99	238,094	33.86	Lone parent households with dependents	3,485	7.30	63,921	9.09	People providing unpaid care	12,821	10.69	231,980	11.82
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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 needs/experiences/priorities
Religious belief	None identified
Political opinion	None identified
Racial group	some staff and public who do not have English as a first language may need to have information provided in other languages
Age	None identified
Marital status	None identified
Sexual orientation	None identified
Men and women generally	None identified
Disability	None identified
Dependants	None identified

Section 2 – Screening Questions

In making a decision as to carry out an Equality Impact Assessment (EQIA), the Council should consider its answers to the questions 1- 3 detailed below.

If the Council's conclusion is **none** in respect of all of the Section 75 equality of opportunity categories, then the Council may decide to screen the policy out. If a policy is 'screened out' as having no relevance to equality of opportunity, the Council should give details of the reasons for the decision taken.

If the Council's conclusion is **major** in respect of one or more of the Section 75 equality of opportunity, then consideration should be given to subjecting the policy to the equality impact assessment procedure.

If the Council's conclusion is **minor** in respect of one or more of the Section 75 equality 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.

In favour of a 'major' impact

- a) The policy is significant in terms of its strategic importance;
- b) 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;
- c) Potential equality impacts are likely to be adverse or are likely to be experienced disproportionately by groups of people including those who are marginalised or disadvantaged;
- d) 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;
- e) The policy is likely to be challenged by way of judicial review;
- f) The policy is significant in terms of expenditure.

In favour of 'minor' impact

- a) The policy is not unlawfully discriminatory and any residual potential impacts on people are judged to be negligible;
- b) 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;
- c) 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;
- d) By amending the policy there are better opportunities to better promote equality of opportunity.

In favour of none

- a) The policy has no relevance to equality of opportunity.

- b) The policy is purely technical in nature and will have no bearing in terms of its likely impact on equality of opportunity for people within the equality categories.

Screening questions

1. What is the likely impact on equality of opportunity for those affected by this policy, for each of the Section 75 equality categories (minor/ major/ none)		
Section 75 category	Details of policy impact	Level of impact? minor/major/none
Religious Belief	The policy is intended to benefit everyone regardless of equality category. No differential impact identified for those of different religious belief	None
Political opinion	The policy is intended to benefit everyone regardless of equality category. No differential impact identified for those of different political opinion	None
Racial group	The policy is intended to benefit everyone regardless of equality category. However those who do not have English as a first language may need additional support to understand the policy and implement associated procedures	Minor
Age	The policy is intended to benefit people of all ages.	Minor
Marital status	None identified	None
Sexual orientation	None identified	None
Men & women generally	None identified	None
Disability	The policy is intended to benefit everyone regardless of equality category	Minor

Dependants	None identified	None
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2. Are there opportunities to better promote equality of opportunity for people within Section 75 equality categories? (Yes/ No)

Section 75 category	If Yes , provide details	If No , provide reasons
Religious belief		No, the policy defines specific organisational roles and responsibilities which are underpinned by a set of procedures
Political opinion		No, the policy defines specific organisational roles and responsibilities which are underpinned by a set of procedures
Racial group	Whilst the policy defines specific organisational roles and responsibilities which are underpinned by a set of procedures steps will be taken to ensure that staff and members of the public who do not have English as a first language understand any health and safety instructions/signs/procedures to ensure that they comply with and benefit from the policy	
Age		No, the policy defines specific organisational roles and responsibilities which are underpinned by a set of procedures
Marital status		No, the policy defines specific organisational roles and responsibilities which are

		underpinned by a set of procedures
Sexual orientation		No, the policy defines specific organisational roles and responsibilities which are underpinned by a set of procedures
Men and women generally		No, the policy defines specific organisational roles and responsibilities which are underpinned by a set of procedures
Disability		No, the policy defines specific organisational roles and responsibilities which are underpinned by a set of procedures
Dependants		No, the policy defines specific organisational roles and responsibilities which are underpinned by a set of procedures

3. Are there opportunities without prejudice, to the equality of opportunity duty, to better promote good relations between Section 75 equality categories, through tackling prejudice and/ or promoting understanding? (Yes/ No)

	No	x
	Yes	
If yes, please detail the opportunities below:		
There is nothing to suggest that the policy implementation will adversely impact upon good relations.		

If yes is concluded to Question 3, then the policy will be referred to the Council's Good Relations Working Group for consideration. The Group will consider the potential opportunities and assess if and how the overall impact of a decision/policy can better promote good relations.

Additional Considerations - Multiple identity

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? (<i>For example; disabled minority ethnic people; disabled women; young Protestant men; and young lesbians, gay and bisexual people</i>).
No, due specifically to the legislative nature of this policy
Provide details of data on the impact of the policy on people with multiple identities. Specify relevant Section 75 categories concerned.
Refer to above.

Section 3 – Screening Decision

In light of answers provided to the questions within Section 3 select one of the following with regards the policy:

		Select One
1	Shall not be subject to an EQIA - <i>with no mitigating measures required</i>	
2	Shall not be subject to an EQIA - <i>mitigating measures/ alternative policies introduced</i>	X
3	Shall be subject to an EQIA	

If 1 or 2 above (i.e. not to be subject to an EQIA) please provide details of reasons why.

No EQIA is necessary as only minor impacts have been identified and these will be mitigated by the steps identified below. The Council as an employer accepts its legal responsibilities to employees and others affected under the Health and Safety at Work Order (NI) as amended.

If 2 above (i.e. not to subject to an EQIA) in what ways can adverse impacts attaching to the policy be mitigated or an alternative policy be introduced.

The policy and associated procedures can be made available in different languages or formats if required. Communication and training/support for staff will take account of the needs identified above

If 3 above (i.e. shall be subject to an EQIA), please provide details of the reasons.

Not applicable

Mitigation

When it is concluded 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.

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

If so, give the **reasons** to support your decision, together with the proposed changes/amendments or alternative policy:

Additional training/support for staff who do not have English as a first language or who have for example a learning disability will be considered. This will include additional briefings, easy read versions, alternative formats or translated material as required. Staff needs will be identified and addressed through corporate and team induction and ongoing supervision.

For the public/visitors to premises, signage and instructions will be easy to recognise and understand. Training and procedures will be implemented as appropriate so that staff can identify and deal with the additional needs of groups.

Timetabling and prioritising

If the policy has been screened in for equality impact assessment, please answer the below to determine its priority for timetabling the equality impact assessment.

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

Priority criterion	Rating (1-3)
Effect on equality of opportunity	
Social need	
Effect on people's daily lives	
Relevance to a Council'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 the Council in timetabling. Details of the Council's Equality Impact Assessment Timetable should be included in the Screening Reports.

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

Yes	
No	

Section 5 – Monitoring

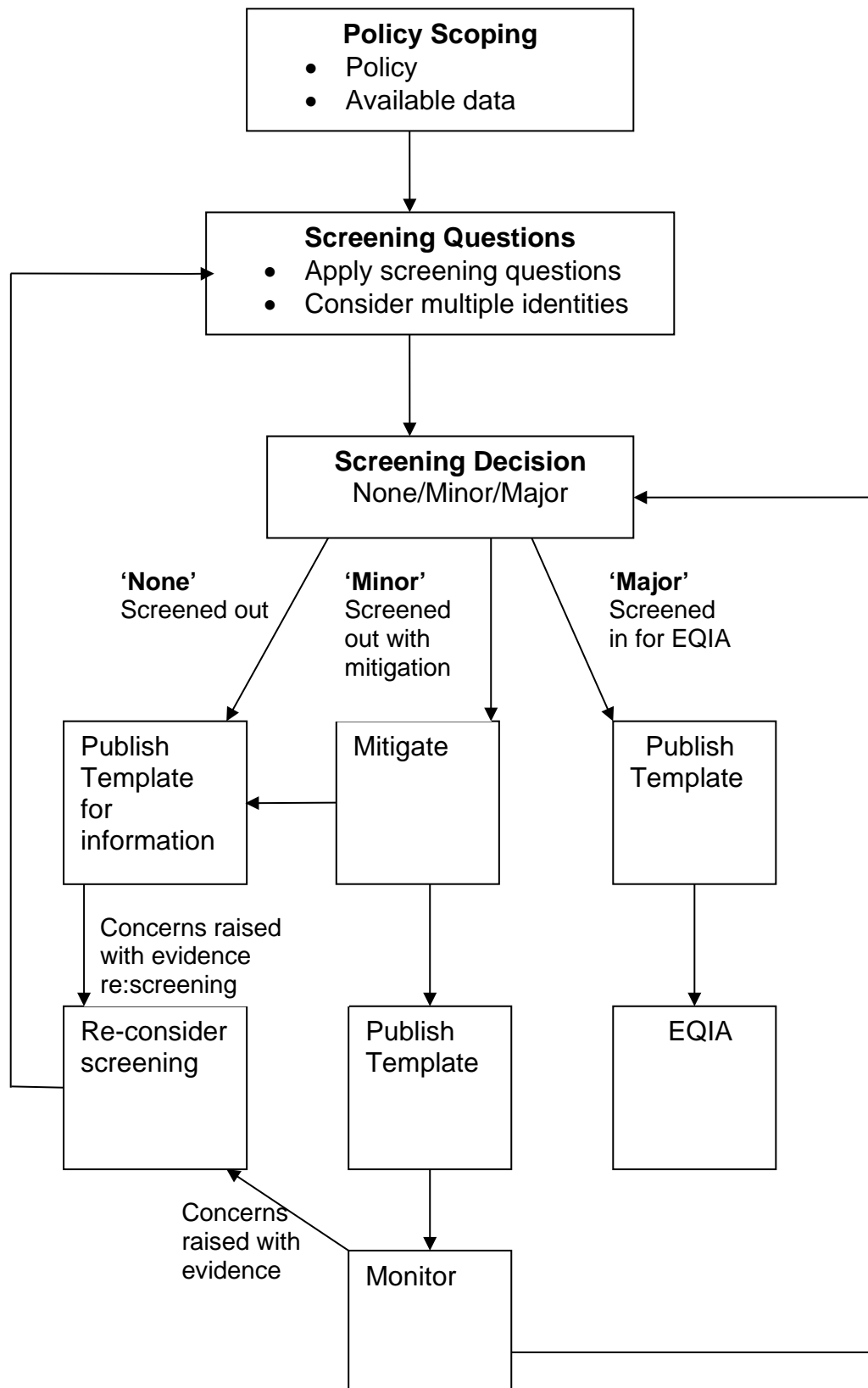
Effective monitoring will help identify any future adverse impact arising from the policy which may lead the Council to conduct an equality impact assessment, as well as help with future planning and policy development. Please detail proposed monitoring arrangements below:

It is intended to review the policy every 24 months with a view to legislative changes being incorporated.

Section 6 – Approval and authorisation

Screened by:	Position/ Job Title	Date
Rory Donnelly	Corporate Health and Safety Manager	28-01-20
Approved by:	Position/ Job Title	Date
Mark Kelso	Director, Public Health & Infrastructure	28-01-20

Note: A copy of the Screening Template, for each policy screened should be ‘signed off’ and approved by a senior manager responsible for the policy; made easily accessible on the council website as soon as possible following completion and be available on request.



Rural Needs Impact Assessment (RNIA)

SECTION 1 - Defining the activity subject to Section 1(1) of the Rural Needs Act (NI) 2016

1A. Name of Public Authority.

Mid Ulster District Council

1B. Please provide a short title which describes the activity being undertaken by the Public Authority that is subject to Section 1(1) of the Rural Needs Act (NI) 2016.

Council has committed towards achieving the occupational health and safety (OH&S) management standard ISO45001:2018 Standard. This Standard provides a framework for the Council to manage risks and opportunities to help prevent work related injury and ill health. The existing Health and Safety Policy (2016) has been revised in line with the requirements of BS ISO 45001:2018

1C. Please indicate which category the activity specified in Section 1B above relates to.

Developing a	Policy <input type="checkbox"/>	Strategy <input type="checkbox"/>	Plan <input type="checkbox"/>
Adopting a	Policy <input type="checkbox"/>	Strategy <input type="checkbox"/>	Plan <input type="checkbox"/>
Implementing a	Policy <input type="checkbox"/>	Strategy <input type="checkbox"/>	Plan <input type="checkbox"/>
Revising a	Policy <input checked="" type="checkbox"/>	Strategy <input type="checkbox"/>	Plan <input type="checkbox"/>
Designing a Public Service	<input type="checkbox"/>		
Delivering a Public Service	<input type="checkbox"/>		

1D. Please provide the official title (if any) of the Policy, Strategy, Plan or Public Service document or initiative relating to the category indicated in Section 1C above.

Health and Safety Policy Revised February 2020

1E. Please provide details of the aims and/or objectives of the Policy, Strategy, Plan or Public Service.

The aim of this policy is to outline the Council's commitment to compliance with statutory health and safety at work legislation and the Council has arrangements in place to ensure this occurs consistently across the Council Structure and organisation.

1F. What definition of 'rural' is the Public Authority using in respect of the Policy, Strategy, Plan or Public Service?

Population Settlements of less than 5,000 (Default definition).

☒

Other Definition (Provide details and the rationale below).

☐

A definition of 'rural' is not applicable.

☐

Details of alternative definition of 'rural' used.

Rationale for using alternative definition of 'rural'.

Reasons why a definition of 'rural' is not applicable.

SECTION 2 - Understanding the impact of the Policy, Strategy, Plan or Public Service

2A. Is the Policy, Strategy, Plan or Public Service likely to impact on people in rural areas?

Yes ☒ No ☐ If the response is **NO** GO TO Section **2E**.

2B. Please explain how the Policy, Strategy, Plan or Public Service is likely to impact on people in rural areas.

This policy will potentially impact on all staff, service users and the public across the district, regardless of whether they are rural or urban. There is no differential impact anticipated.

2C. If the Policy, Strategy, Plan or Public Service is likely to impact on people in rural areas differently from people in urban areas, please explain how it is likely to impact on people in rural areas differently.

No differential impact anticipated.

2D. Please indicate which of the following rural policy areas the Policy, Strategy, Plan or Public Service is likely to primarily impact on.

Rural Businesses	<input type="checkbox"/>
Rural Tourism	<input type="checkbox"/>
Rural Housing	<input type="checkbox"/>
Jobs or Employment in Rural Areas	<input type="checkbox"/>
Education or Training in Rural Areas	<input type="checkbox"/>
Broadband or Mobile Communications in Rural Areas	<input type="checkbox"/>
Transport Services or Infrastructure in Rural Areas	<input type="checkbox"/>
Health or Social Care Services in Rural Areas	<input type="checkbox"/>
Poverty in Rural Areas	<input type="checkbox"/>
Deprivation in Rural Areas	<input type="checkbox"/>
Rural Crime or Community Safety	<input type="checkbox"/>
Rural Development	<input type="checkbox"/>
Agri-Environment	<input type="checkbox"/>
Other (Please state)	<input type="text" value="Delivery of Council services"/>

If the response to Section 2A was YES GO TO Section 3A.

2E. Please explain why the Policy, Strategy, Plan or Public Service is NOT likely to impact on people in rural areas.

SECTION 3 - Identifying the Social and Economic Needs of Persons in Rural Areas

3A. Has the Public Authority taken steps to identify the social and economic needs of people in rural areas that are relevant to the Policy, Strategy, Plan or Public Service?

Yes ☒ No ☐ If the response is **NO** GO TO Section **3E**.

3B. Please indicate which of the following methods or information sources were used by the Public Authority to identify the social and economic needs of people in rural areas.

Consultation with Rural Stakeholders	<input type="checkbox"/>	Published Statistics	<input type="checkbox"/>
Consultation with Other Organisations	<input type="checkbox"/>	Research Papers	<input type="checkbox"/>
Surveys or Questionnaires	<input type="checkbox"/>	Other Publications	<input type="checkbox"/>
Other Methods or Information Sources (include details in Question 3C below).			<input checked="" type="checkbox"/>

3C. Please provide details of the methods and information sources used to identify the social and economic needs of people in rural areas including relevant dates, names of organisations, titles of publications, website references, details of surveys or consultations undertaken etc.

The council officer with responsibility for advising on rural needs was consulted. She has knowledge of rural needs issues and regularly consults with organisations such as the Rural Community Network and the NI Rural Women's Network. As no specific rural needs have been identified in relation to this policy, it was not considered necessary to carry out any detailed research or consultation.

3D. Please provide details of the social and economic needs of people in rural areas which have been identified by the Public Authority?

Mid Ulster Council is a predominantly rural district with only 4 settlements having more than 5,000 residents. The main needs identified are:

- Issues re proximity to key services (e.g., Council offices, health, education, banking, retail, leisure)
- Access to transport, especially for older people, disabled people, women and young people
- Journey times to key towns – the District covers a wide geographic area
- Access to Broadband and mobile signal; and, where available, poorer download speeds
- Access to jobs within a reasonable travelling distance
- Access to childcare to support people who want to work or set up a business – particular issue for women. Inadequate provision in rural areas, high cost of childcare and services not flexible to meet the needs of people who have to work outside standard 9-5, Mon-Fri pattern
- Support for business and enterprise
- Affordable housing in rural areas, e.g., near relatives or where people have grown up
- Particular issues for farm families, re income
- Rural poverty – evidence that there is more poverty in rural areas, including fuel poverty
- Social isolation is an issue for many people in rural areas – can be worse for older people, those who live on their own, women, carers, those with disabilities and people on low incomes.

If the response to Section 3A was YES GO TO Section 4A.

3E. Please explain why no steps were taken by the Public Authority to identify the social and economic needs of people in rural areas?

SECTION 4 - Considering the Social and Economic Needs of Persons in Rural Areas

4A. Please provide details of the issues considered in relation to the social and economic needs of people in rural areas.

All the above were considered but it was felt that they have no bearing on the Health & Safety Policy which applies to all staff, service users and the public regardless of where they live or work and also applies to all Council premises in both urban and rural locations.

SECTION 5 - Influencing the Policy, Strategy, Plan or Public Service

5A. Has the development, adoption, implementation or revising of the Policy, Strategy or Plan, or the design or delivery of the Public Service, been influenced by the rural needs identified?

Yes

☐

No

☒

If the response is **NO** GO TO Section **5C**.

5B. Please explain how the development, adoption, implementation or revising of the Policy, Strategy or Plan, or the design or delivery of the Public Service, has been influenced by the rural needs identified.

If the response to Section **5A** was **YES** GO TO Section **6A**.

5C. Please explain why the development, adoption, implementation or revising of the Policy, Strategy or Plan, or the design or the delivery of the Public Service, has NOT been influenced by the rural needs identified.

The Policy defines specific organisational roles and responsibilities which are underpinned by a set of procedures.

On consideration, it was felt that this particular policy had no relevance to rural needs. The policy applies to all staff and service users, regardless of location, and no specific rural impact has been identified.

SECTION 6 - Documenting and Recording

6A. Please tick below to confirm that the RNIA Template will be retained by the Public Authority and relevant information on the Section 1 activity compiled in accordance with paragraph 6.7 of the guidance.

I confirm that the RNIA Template will be retained and relevant information compiled. ☒

Rural Needs Impact Assessment undertaken by:	Rory Donnelly
Position/Grade:	Corporate Health and Safety Manager
Division/Branch	
Signature:	Rory Donnelly
Date:	27/1/2020
Rural Needs Impact Assessment approved by:	Mark Kelso
Position/Grade:	Director of Public Health and Infrastructure
Division/Branch:	
Signature:	Mark Kelso
Date:	27/01/2020