



Patient Client Council

Public Authority Statutory Equality, Good Relations and Disability Duties - Annual Progress Report 2025-26

Contact:

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Section 49A of the Disability Discrimination Act 1995 and Disability Action Plan	As above ☒

Documents published relating to our Equality Scheme can be found at: **(ECNI Q28):** [Corporate Documents \(pcc-ni.net\)](https://pcc-ni.net/Corporate-Documents) .Our Equality Scheme is due to be reviewed again by 30th June 2026.

Signature:

A rectangular box containing a handwritten signature in black ink. The signature appears to read 'Una McKernan' in a cursive script.

This report has been prepared adapting a template circulated by the Equality Commission. It presents our progress in fulfilling our statutory equality and disability duties. This report reflects progress made between April 2025 and March 2026

Contents

Chapter	Page
1. Summary Quantitative Report	3
2. Section 75 Progress Report Appendix 1 Further Explanatory Notes	6
3. Equality and Disability Action Plan Progress Report	Attached
4. Screening Report (ECNI Q18)	Attached
5. Mitigation Report (ECNI Q1,3,3a,3b)	Attached

Chapter 1 Summary Quantitative Report (ECNI Q15,16,19)

Screening, EQIAs and Consultation

1. Number of policies screened (as recorded in screening reports). (see also Chapter 6)	Screened in	Screened out with mitigation	Screened out without mitigation	No concerns were raised by consultees on screenings published in 2025-26
4		1	3	
2. Number of policies subjected to Equality Impact Assessment.	0			
3. Indicate the stage of progress of each EQIA.	Title and Stage N/A			

4. Number of policy consultations conducted	0
5. Number of policy consultations conducted with screening presented.	0

(ECNI Q24)
Training

6. Staff training undertaken during 2025-26. (See also Chapter 2, Q6)

Course	No of Staff Trained	No of Board Members Trained
Equality Screening Training	0	0
Equality Impact Assessment Training	0	0
Other	0	0
Total	0	0

eLearning: Making a Difference

Part 1 – All Staff	11
Part 2 – Line Managers	1

(ECNI Q27)
Complaints

7. Number of complaints in relation to the Equality Scheme received during 2025-26

0

Please provide detail of any complaints:

N/A

(ECNI Q7)
Equality Action Plan (see also Chapter 3)

During 2024-25, the Patient and Client Council (PCC) undertook a review of the current Equality Action Plan and concluded that some of the original targets are no longer fully reflective of the organisation's strategic direction or the evolving needs of the communities we serve.

We acknowledge that, during 2025-26, we did not develop revised and more targeted plans covering the period 2026–28 as we had intended to

do. The aim is to ensure that our commitments remain relevant, impactful, and aligned with best practice in promoting equality and inclusion.

We remain committed to upholding our Section 75 and Disability Duties and will continue to engage with stakeholders throughout this process to ensure the new plans are robust, inclusive, and evidence-based.

We commit to revising some of our original targets by 31 January 2027.

8. Within the 2025-26 reporting period, please indicate the number of:

Actions completed: Actions ongoing: Actions to commence:

**(ECNI Part B Q1)
Disability Action Plan (see also Chapter 3)**

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We remain committed to upholding our Section 75 and Disability Duties and will continue to engage with stakeholders throughout this process to ensure the new plans are robust, inclusive, and evidence-based.

We commit to revising some of our original targets by 31 January 2027.

Within the 2025-26 reporting period, please indicate the number of:

Actions completed: Actions ongoing: Actions to commence:

Chapter 2 Section 75 Progress Report

(ECNI Q1,2,3,3a,3b,23)

1. In 2025-26, please provide examples of key policy/service delivery developments made by the public authority in this reporting period to better promote equality of opportunity and good relations; and the outcomes and improvements achieved. Please relate these to the implementation of your statutory equality and good relations duties and Equality Scheme where appropriate.

Example 1: Support in the Community

Equality Groups: Age, Race/Ethnicity, Disability, and others

In its 'Support in the Community' pilot project, the PCC has focused on widening engagement through outreach work. Across a series of events over 900 people engaged with the organisations. The project exceeded its engagement targets, successfully reaching individuals from a diverse range of marginalised communities, including, for example, older men, Roma people and those from other ethnic minorities as well as people with a disability. Engagement was broadly equitable across groups, reflecting effective partnership working and culturally appropriate outreach strategies. The findings demonstrate that proactive outreach significantly improves access compared to passive service models. The range of services provided during and subsequent to the events was well aligned with identified needs. Feedback and case studies confirm that interventions were relevant, timely, and impactful, often addressing issues that would otherwise have remained unresolved. The support in the community led approach contributed to improved confidence, understanding, and navigation of health and social care systems.

The project was originally established as a pilot from October 2025 to March 2026 but such was the success the Support in the Community programme has become "Business as Usual". Indicators strongly suggest positive impact across multiple domains including:

- Increased Access to Advocacy - Increased advocacy uptake is expected to translate into improved health opportunities, empowerment of individuals, which links to an increase for better health outcomes.

- Enhanced Public Involvement and Membership Diversity - The project has strengthened pathways into PCC membership and engagement platforms for underrepresented groups.
- Improved Organisational Intelligence - The development of an asset map of advocacy and support organisations represents a significant organisational gain. This network of networks approach enhances referral pathways, reduces duplication, and strengthens system-wide responses to inequality.

Support in the Community has proven effective in reaching individuals who may feel hesitant to approach statutory services or navigate complaints systems. By embedding advocacy within trusted local settings, Support in the Community has built confidence, reduced anxiety, and enabled timely resolution of issues and complaints.

Those clients who engaged with our Support in the Community service mostly received the information required in that interaction. However, in some instances the issues raised by people required and received further support by PCC Practitioners and thus became clients of the PCC.

Most contacts and cases required advocacy support in trying to seek a satisfactory outcome for a client. However, in a smaller number of cases, support was required with a complaint to the HSC. 5 clients were supported with 'Positive Passporting' where they were facilitated to engage with specific external services with a specialism in a relevant area.

Adopting a 'positive passporting' approach means that PCC take time to explore the needs of people engaging with the PCC, identifying what action is possible through PCC support, and the additional services needed that PCC may not be able to provide. The aim is for PCC to connect individuals, through a 'positive passport', into those other services. PCC is committed to engaging with other organisations to enhance the support available for members of the public on issues or concerns they may have. This includes receiving referrals from partner organisations. Formal arrangements are in place with some 30 organisations and ongoing engagement through PCC membership of Helplines NI.

Example 2: Using our influence – Consultation responses

Equality Groups: Disability, Age

With a view to influencing systemic and service level change in the best interest of the public, PCC submitted responses on a number of public consultations in 2025-26 that are directly related to Section 75 groups:

- Learning Disability Service Model Consultation;
- Consultation on the Draft Revised Mental Health (NI) Order 1986 Codes of Practice;
- PCC Submission to the Health Committee on the Adult Protection Bill.

Example 3: Engagement Platforms

Equality Groups: Disability, Age

Themed engagement platforms under PCC Engage provide members of the public with a forum for engagement on specific areas of policy in development and connect them with representatives across health and social care and voluntary and community sectors. This is critical in fulfilling our statutory functions of promoting the involvement of the public and representing their interests.

Engagement Platform is a space to bring together a group of people, with a common theme or interest and lived experience, to work together and make change in health and social care. Engagement Platforms allow participants to communicate their experiences and thoughts, related to a policy programme, with the PCC, as well as being able to share their views directly with decision-makers in health and social care. Engagement Platforms are a significant opportunity for decision makers in health and social care to have meaningful input from experts by experience, in service areas under review, development and reform. PCC facilitated five Engagement Platforms in 2025-26. This year we held 43 meetings, with a total of 160 engagement platform attendances by members. Four of these related directly to one or more Section 75 equality groups:

- Care of Older People
- Learning Disability
- Adult Protection
- Mental Health

Example 4: What the Public Think

Equality Groups: Age

In October 2025 PCC published 'What the Public Think' which sets out a summary of the key findings from a region wide poll on people's experience, beliefs and understanding of health and social care 'winter pressures' in Northern Ireland. The report creates a regional baseline to inform and support the 'Big Discussion – Whole System Flow' work led by the Chief Nursing and Chief Medical Officers to plan a collaborative, system-wide response to anticipated pressures. It also sets out key findings to inform and support the broad range of initiatives set out in the Minister for Health's HSC Reset Plan.

Building on the findings of the 'What the Public Thinks' and 'People to Partners' reports, PCC has worked throughout 2025-26 with the Department and partners to explore a systemic approach to engagement with the public, focusing on the 'Older People' population.

Further relevant developments

During the year, supported by the BSO Equality Unit, the PCC commenced the **Five Year Review of Equality Scheme**. The organisations adopted an approach and methodology developed by the Equality Unit that is closely aligned with the Commission's guidance and that is based on the principles of collaboration, proportionality, and making maximum use of limited resources.

Much emphasis herein was placed in identifying and discussing learning and good practice across partner organisations at quarterly Equality Forum meetings. This involved presentations from individual partner organisations and Forum discussions.

Over the past year, development has continued on the BSO SharePoint **Equality Portal**. New content includes a range of screening guidance documents for example guidance for screening the procurement of a service. Screening evidence has been added, such as up-to-date data on regional interpreting service statistics and signposting to the Children and Young People's Strategic Partnership interactive map-based data on Children and Young People in NI. In addition, staff can now access clear information on how to book foreign language and sign language interpreting services.

Concluding Comments

In most cases, it is not possible to ascribe developments and changes to a single factor. New initiatives are not necessarily an outcome of screenings or Equality and Disability Action Plan implementation. As the promotion of equality becomes part of the organisational culture and way of working, the more difficult it becomes to ascribe activities and outcomes to the application of a specific element of Equality Scheme implementation. From this point of view, staff training and engagement and consultation are arguably the most important factors.

Where changes resulted from equality screenings, these will be listed in Chapter 6, the mitigation report.

(ECNI Q4,5,6)

2. During the 2025-26 reporting period

(a) were the Section 75 statutory duties integrated within...?

	Yes/No	Details
Job descriptions	Yes	For all new posts, the Job Description includes the following: “Assist the organisation in fulfilling its statutory duties under Section 75 of the Northern Ireland Act 1998 to promote equality of opportunity and good relations and under the Disability Discrimination (Northern Ireland) Order 2006. Staff are also required to support the organisation in complying with its obligations under Human Rights Legislation.”
Performance objectives for staff	No	N/A

(b) were objectives and targets relating to Section 75 integrated into...?

	Yes/No	Details
Corporate/strategic plans	Yes	Strategic Goal 3 PCC Engage: Objective 3 To provide the public with a range of opportunities to get involved and connected to representatives across Health and Social Care, the voluntary and community sectors and other appropriate bodies • (2025-26) Continue to support the engagement platforms by facilitating a minimum of one meeting per quarter under themed areas of work including:

		Mental Health; Learning Disability; Care of Older People; Adult Safeguarding; (subject to change based on demand) Publish report on the review of the Mental Health Engagement platform which will contribute to the review of and publication of PCC's engagement offer.
Annual business plans	Yes	See above

(ECNI Q11,12,17)

3. Please provide any details and examples of good practice in consultation during the 2025-26 reporting period, on matters relevant (e.g. the development of a policy that has been screened in) to the need to promote equality of opportunity and/or the desirability of promoting good relations:

The PCC did not conduct any formal public consultations during 2025-26.

(ECNI Q21, 26)

4. In analysing monitoring information gathered, was any action taken to change/review any policies?

In June 2025, we began specifically asking people who attended the Support in the Community Service if they wished to provide Section 75 data to help us understand the demographics of those using this new outreach service, including religious belief, political opinion, disability, race, gender, age, marital status and sexual orientation. This information was provided by 36 people. See Question 1 for further information on this work.

(ECNI Q22)

5. Please provide any details or examples of where the monitoring of policies, during the 2025-26 reporting period, has shown changes to differential/adverse impacts previously assessed:

Not applicable

(ECNI Q25)

6. Please provide any examples of relevant training shown to have worked well, in that participants have achieved the necessary skills and knowledge to achieve the stated objectives:

This year, PCC staff did not avail of the joint Section 75 training programme that is coordinated and delivered by the BSO Equality Unit for staff across all 11 partner organisations. We will continue to monitor our training needs.

(ECNI Q29)

7. Are there areas of the Equality Scheme arrangements (screening/consultation/training) your organisation anticipates will be focused upon in the next reporting period? (please provide details)

- Five Year Review of Equality Scheme (to be completed by end June 2026)
- Equality and Disability Action Plans

Appendix 1 – Further Explanatory Notes

1 Consultation and Engagement

(ECNI Q10)

targeting – We did not undertake any public consultations or pre-consultation exercises during the year.

(ECNI Q13)

awareness raising for consultees on Equality Scheme commitments –

During the year, in our quarterly screening reports we raised awareness as to our commitments relating to equality screenings and their publication.

(ECNI Q14)

consultation list – During the year, we reviewed our consultation list every quarter in relation to bounce backs.

2 Audit of Information Systems

(ECNI Q20)

We completed an audit of information systems at an early stage of our Equality Scheme implementation, in line with our Scheme commitments.