

Equality and Human Rights Screening Template



Corporate Strategy 2024-28

February 2024

NIPEC is required to consider the likely equality implications of any policies or decisions. In particular it is asked to consider:

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)?
2. Are there opportunities to better promote equality of opportunity for people within the Section 75 equality categories?
3. To what extent is the policy likely to impact on good relations between people of a different religious belief, political opinion or racial group (minor / major / none)?
4. Are there opportunities to better promote good relations between people of a different religious belief, political opinion or racial group?

For advice on screening please contact: staff in the Equality Unit Business Services Organisation, equality.unit@hscni.net or Telephone 028 9536 3961

For information (evidence, data, research etc.) on the Section 75 equality groups see the Equality and Human Rights Information Bank on the BSO website – <http://www.hscbusiness.hscni.net/services/1798.htm>

As part of the audit trail documentation needs to be made available for all policies as decisions examined for equality and human rights implications. The screening template is a pro forma to document consideration of each screening question.

(1) INFORMATION ABOUT THE POLICY OR DECISION 1.1
policy or decision

Title of

Corporate Strategy 2024-28

1.2 Description of policy or decision

- **what is it trying to achieve? (aims and objectives)**
- **how will this be achieved? (key elements)**
- **what are the key constraints? (for example, financial, legislative or other)**

Vision, Mission, Aims and Objectives

The Northern Ireland Practice and Education Council (NIPEC) was established in 2002 through primary legislation under the Health and Personal Social Services Act (2002) as a Non-Departmental Public Body (NDPB). NIPEC's statutory responsibilities identified under the legislation include the promotion of:

- *high standards of practice among nurses and midwives*
- *high standards in the education and training of nurses and midwives*
- *professional development of nurses and midwives*

and the provision of:

- *guidance on best practice for nurses and midwives*
- *advice and information on matters relating to nursing and midwifery.*

The work of NIPEC reflects the requirements set out by the regulatory body for nurses and midwives, the Nursing and Midwifery Council (NMC), as articulated in *The Code: Professional Standards of Practice and Behaviour for Nurses and Midwives and Nursing Associates* (NMC, 2018). NIPEC's work programme remains closely aligned to that of the NMC.

NIPEC plays a significant role in supporting the vision and objectives of the Chief Nursing Officer (CNO), Department of Health (DoH). This is articulated particularly in the *Shaping our Future* report which provides a Vision for Nursing and Midwifery in Northern Ireland for 2023-28.

NIPEC's Corporate Plan 2023-28 is informed by the *Programme for Government (PfG) draft Outcomes Framework*. The over-arching PfG commitment for the DoH is that *'we all enjoy long, healthy and active lives.'*

NIPEC's Vision for 2024-28 is to continue to work as an organisation that will be: **'leading and inspiring nurses and midwives to uphold excellence in professional practice'**. NIPEC's Mission is: **'to promote further the**

highest standards of practice, education and professional development of nurses and midwives to facilitate the delivery of safe, effective, compassionate, person-centred services.'

In order to deliver to its Vision and Mission, NIPEC has four Strategic Priorities with associated Outcomes for 2024-28, developed in conjunction with key stakeholders.

Practice The outcome aimed for is that the NIPEC programme of work will contribute positively to the practice standards of nurses and midwives. This will be achieved by:

- Incorporating best evidence and continuous improvement in NIPEC's work at local and regional levels.
- Sharing and disseminating best practice based on robust evidence, regionally, nationally and internationally.

Education The outcome aimed for is that the NIPEC programme of work will impact positively on the standards of education for nurses and midwives. This will be achieved by:

- Influencing and informing the design, development and delivery of education, nursing and learning and development programmes and activities based on up-to-date, evidence-based practice.
- Contributing to the quality assurance of education, learning and development programmes and activities.

Professional Development The outcome aimed for is that the NIPEC programme of work will impact positively on the regional professional agenda for nurses and midwives. This will be achieved by:

- Influencing and informing the delivery of the CNO's strategic professional vision for nursing and midwifery based on up-to-date, evidence-based practice.
- Informing the strategic HSC/NHS policy direction and transformation agenda through strong professional leadership in order to reflect the professional priorities for nursing and midwifery.

Guidance, Advice and Information The outcome aimed for is that NIPEC will be a valuable resource of professional advice and information for Northern Ireland. This will be achieved by:

- Interpreting, translating and supporting the implementation of relevant legislation and policy relating to all aspects of practice, education and professional development of nurses and midwives.
- Acting as a professional resource for decision-making.

Key Constraints

Progress against Objectives will be regularly monitored in line with pre-determined criteria. The implementation of the Corporate Plan requires a supporting infrastructure of robust governance and appropriate resources. A key assumption made in planning NIPEC's strategic priorities 2024-2028 is a financial breakeven each year. The Plan will be reviewed annually to ensure it continues to reflect current and anticipated demands.

In addition, NIPEC will continue to provide the DoH with assurance regarding its corporate and financial performance through:

- Effective and proportionate business risk management;
- Robust financial governance arrangements;
- Compliance with statutory and regulatory requirements;
- Effective stewardship of public funds, assets and resources; and
- Continuous quality improvement, including information, communication and technology infrastructure and resources.

1.3 Main stakeholders affected (internal and external)

For example, staff, actual or potential service users, other public sector organisations, voluntary and community groups, trade unions or professional organisations or private sector organisations or others

NIPEC key stakeholders include:



- Nursing and Midwifery registrants;
- Nursing and Midwifery Council (NMC);
- Department of Health (DoH);
- Chief Nursing Officer (CNO);
- HSC Trusts;
- Higher Education Institutions, i.e. Queens University Belfast, Ulster University, Open University;
- Independent / Voluntary Sector;
- Professional bodies / staff side organisations;
- Other regional HSC organisations;
- Members of the public, particularly people with lived experience, carers, families and communities.

1.4 Other policies or decisions with a bearing on this policy or decision

- what are they?
- who owns them?

The NI Executive's Programme for Government sets out the strategic vision to improve the wellbeing of the people of Northern Ireland. Its draft Outcomes Framework (2021) was designed to drive changes to how public services are delivered in Northern Ireland.



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The Department of Health (DoH) is the government body responsible for health and social care in Northern Ireland. The DoH Business Plan 2023-24 can be accessed at <https://www.health-ni.gov.uk/publications/department-health-departmental-strategic-business-plan-2023-24>.

The aim of an Integrated Care System (ICS) is to move to a new way of planning, managing and delivering health and social care services based on the specific needs of the population. It is envisaged that this will be achieved through greater collaborative working with key statutory and community partners. Further information is available at: <https://online.hscni.net/our-work/integrated-care-system-ni/>.

The Department of Health (2016). *Health and Wellbeing 2026: Delivering Together*, a ten-year strategy setting out the Health Minister's vision for change within health and social care. Available for download at [health-and-wellbeing-2026-delivering-together \(health-ni.gov.uk\)](https://www.health-ni.gov.uk/publications/health-and-wellbeing-2026-delivering-together).

The vision set out in *Delivering Together* is based on principles of co-production and co-design working in partnership with those who deliver the services to implement change. See DoH (2018) Co-Production Guide for NI Connecting and Realising Value Through People. Available at: [126493 H&SCB - Co-Production Guide.indd \(health-ni.gov.uk\)](https://www.health-ni.gov.uk/publications/126493-H&SCB-Co-Production-Guide.indd) and also DoH (2012) Personal

and Public Involvement (PPI) Available at: [Personal and Public Involvement \(PPI\) - DoH Guidance to HSC | Department of Health \(health-ni.gov.uk\)](#).

Shaping Our Future, *A Vision for Nursing and Midwifery in NI: 2023-2028* can be accessed at: <https://www.health-ni.gov.uk/sites/default/files/publications/health/NMTG-report-and-recommendations.pdf>.

Details of NIPEC's work on post-registration standards for specialist community and public health nursing can be accessed at <https://nipec.hscni.net/service/ni-nmc-post-reg-stds/>

Nursing and Midwifery Council (NMC) (2018) *The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates*. London: NMC. Available at: <https://www.nmc.org.uk/standards/code/read-the-code-online>

The central resource for those with an interest in HSC services to become involved in their planning, commissioning, delivery and evaluation: [Engage website](#)

(2) CONSIDERATION OF EQUALITY AND GOOD RELATIONS ISSUES AND EVIDENCE USED

For information (evidence, data, research etc.) on the Section 75 equality groups see the Equality and Human Rights Information Bank on the BSO website – <http://www.hscbusiness.hscni.net/services/1798.htm>

2.1 Data gathering

What information did you use to inform this equality screening? For example, previous consultations, statistics, research, Equality Impact Assessments (EQIAs), complaints. Provide details of how you involved stakeholders, views of colleagues, service users, staff side or other stakeholders.

Sources of equality data include:

- Census 2021 data;
- Section 75 equality profile of NIPEC staff (December 2023);
- Research Reports including from GIRES (Gender Identity Research and Education Society) available at: <http://www.gires.org.uk/prevalence.php>
- NMC Equality and Diversity NI data 2022-23;
- NI HSC Workforce Census as at September 2023;
- NISRA;
- Registrar General Annual Report for NI 2022. Available at:

<https://www.nisra.gov.uk/system/files/statistics/RG%20Annual%20Report%202022.pdf>.

2.2 Quantitative Data

Who is affected by the policy or decision? Please provide a statistical profile. Note if policy affects both staff and service users, please provide profile for both.

(Please note that NMC Equality and Diversity NI data relates to 27,687 nurses and midwives who were on the NMC permanent register with an address in NI as at 31 March 2023).

| Category | <i>What is the makeup of the affected group? (%) Are there any issues or problems? For example, a lower uptake that needs to be addressed or greater involvement of a particular group?</i> |
|----------|--|
| Gender | <p>Population Profile of NI (based on NISRA Census Data 2021)</p> <p>The proportion of females in 2021 in NI was 50.8% (967,043) and of males was 49.2% (936,132) (total population of 1,903,175).</p> <p>The Gender Identity Research and Education Society (GIRES) has estimated the number of gender nonconforming employees and service users. The estimate is based on the information that GIRES assembled for the Home Office in 2011 and subsequently updated in 2014:</p> <ul style="list-style-type: none"> • gender nonconforming to some degree (1%) • likely to seek medical treatment for their condition at some stage (0.2%) • receiving such treatment already (0.03%) • having already undergone transition (0.02%) • having a GRC (0.005%) • likely to begin treatment during the year (0.004%). <p>The number who have sought treatment seems likely to continue growing at 20% per annum or even faster. Few younger people present for treatment despite the fact that most gender variant adults report experiencing the condition from a very early age. Yet, presentation for treatment among youngsters is growing even more rapidly (50% p.a.). Organisations should assume that there may be nearly equal numbers of people transitioning from male to female (trans women) and from female to male (trans men).</p> <p>Staff Profile</p> <p>As at December 2023, figures indicate 95.92% of NIPEC workforce is female and 4.08% is male.</p> |
| Age | <p>Population Profile for NI (Census 2021):</p> <p>Age band Population Percentage:</p> <p>0-14 365,200 19.2%</p> |

(15-64 1,211,500 63.7%)

15-39 594,400 31.2%

40-64 617,100 32.4%

(65+ 326,500 17.2%)

65-84 287,100 15.1%

85+ 39,400 2.1%

All ages 1,903,200 100%

Staff Profile

As at December 2023, figures indicate NIPEC's workforce falls within the following age groups:

35-39 – 4.08%

40-44 – 6.12%

45-49 – 2.04%

50-54 – 24.49%

55-59 – 40.82%

60-64 – 16.33%

>65 – 6.12%

NMC Equality and Diversity data for NI in as at March 2023 reports 9.07% on the permanent register are aged 61 and over; 12% are aged 56-60; 11.9% are aged 51-55; 22.1% are aged 41-50; 26.5% are aged 31-40; and 17.8% are aged between 21 and 30.

NI HSC Workforce Census as at September 2023 reports that all staff groups, with the exception of Nurse Support, have seen an increase in their workforce since September 2018. With an increase of 2,259 WTE, the largest increase in the number of WTE staff over the five-year period was in the Registered Nursing & Midwifery staff group (15.0%).

Just over a quarter of the HSC workforce at 30 September 2023 was in the Registered Nursing & Midwifery staff group (17,283 WTE, 26.6%). This staff group has seen an increase of 3.6% (605 WTE) from September 2022, and an increase of 15.0% (2,259 WTE) since September 2018.

| | |
|-----------------|---|
| | <p>NI HSC Workforce Census as at March 2022 reports that 46% of nursing and midwifery staff were aged under 40; 24% were aged 40-49; and 30% were over 50 years of age.</p> |
| <p>Religion</p> | <p>Population Profile for NI</p> <p>Current Religion:</p> <ul style="list-style-type: none"> • ‘no religion’ (17.4%) • ‘religion not stated’ (1.6%) • Catholic (42.3%) • Presbyterian Church in Ireland (16.6%) • Church of Ireland (11.5%) • Methodist (2.4%) • Other Christian denominations (6.9%) • Other non-Christian Religions (1.3%). <p>Staff Profile</p> <p>As at December 2023, figures for NIPEC workforce indicate 44.9% are Protestant, 28.57% are Catholic, 0% are neither and 26.53% are unknown.</p> <p>NMC Equality and Diversity information for the UK for 2022-23 states that 57.4% identify as Christian, with the next largest group being No Religion at 31.3%, with 4.7% Unknown or Prefer Not to Say. The remaining 6% identify as non-Christian religions.</p> <p>NI HSC Workforce Census for this group is unavailable.</p> |

Population Profile for NI

| Total NI Residents 1903178 | | Percentage |
|--|---------|-------------------|
| British only | 606,263 | 31.86% |
| Irish only | 554,415 | 29.13% |
| Northern Irish only | 376,444 | 19.78% |
| British and Irish only | 11,768 | 0.62% |
| British and Northern Irish only | 151,327 | 7.95% |
| Irish and Northern Irish only | 33,581 | 1.76% |
| British, Irish and Northern Irish only | 28,050 | 1.47% |
| Other | 141,327 | 7.43% |

(Census 2021)

Staff Profile

As at December 2023, the political opinion of 98% of NIPEC’s workforce was unknown; 2% stated they were broadly Unionist, whilst the remainder were not assigned or did not wish to answer.

There is no NMC Equality and Diversity NI or UK data for this group.

Marital Status

Population Profile for NI

| Total NI Residents (over the age of 16) 1,514,743 | | Percentage |
|---|---------|-------------------|
| Single (never married or never registered a civil partnership) | 576,708 | 38.07% |
| Married | 690,509 | 45.59% |
| In a civil partnership | 2,742 | 0.18% |
| Separated (but still legally married or still legally in a civil partnership) | 57,272 | 3.78% |
| Divorced or formerly in a civil partnership which is now legally dissolved | 91,128 | 6.02% |
| Widowed or surviving partner from a civil partnership | 96,384 | 6.36% |

(Census 2021)

Staff Profile

As at December 2023, figures indicate 12.24% of NIPEC’s workforce is married or in a civil partnership, whilst 87.71% are unknown.

There is no NMC Equality and Diversity NI or UK data for this group.

NI HSC Workforce Census for this group is unavailable.

| | | | |
|------------------|--|---------|-------------------|
| Dependent Status | Population Profile for NI | | |
| | Total Households with dependent children 768,809 | | Percentage |
| | No children in household | 423,956 | 55.14 |
| | No dependent children in household/All children in household non-dependent | 120,314 | 15.65 |
| | One dependent child aged 0-4 | 27,233 | 3.54 |
| | One dependent child aged 5-11 | 21,123 | 2.75 |
| | One dependent child aged 12-18 | 39,203 | 5.10 |
| | Two dependent children, youngest aged 0-4 | 32,598 | 4.24 |
| | Two dependent children, youngest aged 5-11 | 36,534 | 4.75 |
| | Two dependent children, youngest aged 12-18 | 18,532 | 2.41 |
| | Three or more dependent children, youngest aged 0-4 | 24,120 | 3.14 |
| | Three or more dependent children, youngest aged 5-11 | 21,677 | 2.82 |
| | Three or more dependent children, youngest aged 12-18 | 3,519 | 0.46 |
| (Census 2021) | | | |

Staff Profile

Full data not available, however, the majority of NIPEC staff are female plus anecdotal evidence indicates about half of NIPEC’s workforce have some form of caring responsibilities for family member(s), e.g. spouse, elderly parent(s), and/or children in full time education.

There is no NMC Equality and Diversity NI or UK data for this group.

Disability

NI Population Profile

| Total NI Households 768,810 | | Percentage |
|--|---------|-------------------|
| No residents have a limiting long-term health problem or disability | 423,945 | 55.14% |
| 1 resident has a limiting long-term health problem or disability | 258,537 | 33.63% |
| 2 or more residents have a limiting long-term health problem or disability | 86,328 | 11.23% |

NISRA Census 2021 data

Staff Profile

As at December 2023, 14% of NIPEC’s workforce stated they do not have a disability, no-one stated they have a disability, whilst 86% of the workforce was unknown.

NMC Equality and Diversity data for the UK in 2022-23 reports 94.1% on the permanent register state they do not have a disability, 3% state they do, and 2.9% are unknown or prefer not to answer).

| | |
|-----------|---|
| Ethnicity | <p>Population Profile for NI</p> <p>In the general population the 2021 Census indicated that 3.4% (65,600) of the usual NI resident population belonged to minority ethnic groups.</p> <p>Ethnic Group</p> <p>Ethnic Group Number Percentage White 1,837,600 96.6% Minority Ethnic Group 65,600 3.4% Black 11,000 0.6% Indian 9,900 0.5% Chinese 9,500 0.5% Filipino 4,500 0.2% Irish Traveller 2,600 0.1% Arab 1,800 0.1% Pakistani 1,600 0.1% Roma 1,500 0.1% Mixed Ethnicities 14,400 0.8% Other Asian 5,200 0.3% Other Ethnicities 3,600 0.2% All usual residents 1,903,200 100.0%</p> <p>Country of birth</p> <p>Country of birth Number Percentage Northern Ireland 1,646,300 86.5% Great Britain 92,300 4.8% England 72,900 3.8% Scotland 16,500 0.9% Wales 2,800 0.2% Republic of Ireland 40,400 2.1% Outside United Kingdom and Ireland 124,300 6.5% Europe (other EU countries) 67,500 3.5% Europe (other non-EU countries) 3,700 0.2% Other Countries in the World 53,100 2.8% All usual residents 1,903,200 100.0%</p> <p>Main language of usual residents aged 3 and over</p> <p>Main language Number Percentage English 1,751,500 95.4% Main language not English 85,100 4.6% Polish 20,100 1.1% Lithuanian 9,000 0.5%</p> |
|-----------|---|

Irish 6,000 0.3%
Romanian 5,600 0.3%
Portuguese 5,000 0.3%
Arabic 3,600 0.2%
Bulgarian 3,600 0.2%
Other languages 32,200 1.8%
All usual residents aged 3 and over 1,836,600 100.0%

In addition, Census 2021 figures for NI report Number of all usual residents aged 3 and over; Number and percentage of all usual residents aged 3 and over: English, Polish, Lithuanian, Irish, Romanian, Portuguese, Arabic, Bulgarian, Chinese (not otherwise specified), Slovak, Hungarian, Spanish, Latvian, Russian, Tetun, Malayalam, Tagalog/Filipino, Cantonese, Other languages,

The following languages are spoken by those aged 3 and over:

English: 1,751,510

Polish: 20,134

Lithuanian: 8,978

Irish: 5,969

Romanian: 5,627

Portuguese: 4,982

Arabic: 3,627

Bulgarian: 3,572

Chinese (not otherwise specified) [note 2]: 3,329

Slovak: 2,333

Hungarian: 2,172

Spanish: 1,860

Latvian: 1,700

Russian: 1,605

Tetun: 1,576

Malayalam: 1,478

Tagalog/ Filipino: 1,339

Cantonese: 1,247

Other languages: 13,578

Staff Profile

Full data on NIPEC's workforce is not available, however, anecdotal evidence suggests staff are white and/or of European origin.

NMC Equality and Diversity data for NI in 2022-23 reports 87.01% on the permanent register are white, 1.5% are unknown or prefer not to say, 2.2% are Black/African/Caribbean, 8.8% are Asian Bangladeshi/ Chinese/Indian/Pakistani/Filipino or Arab, and 0.4% are mixed/multiple Ethnic/other Ethnic group.

Sexual orientation

Population Profile for NI

| Total NI Residents (16 and over) 1514743 | | Percentage |
|--|-----------|------------|
| Straight or heterosexual | 1,363,859 | 90.04 |
| Gay or lesbian | 17,713 | 1.17 |
| Bisexual | 11,306 | 0.75 |
| Other sexual orientation | 2,597 | 0.17 |
| Prefer not to say | 69,307 | 4.58 |
| Not stated | 49,961 | 3.30 |

(Census 2021)

NMC Equality and Diversity data for UK in 2022-23 reports that 90.1% on the permanent register identify as Heterosexual or straight, 1.9% are Gay or Lesbian, 1.7% are Bisexual, 6% are unknown or prefer not to say, and 0.2% other.

NI HSC Workforce Census for this group is unavailable.

Staff Profile

Full data not available for NIPEC's workforce.

2.3 Qualitative Data

What are the different needs, experiences and priorities of each of the categories in relation to this policy or decision and what equality issues emerge from this? Note if policy affects both staff and service users, please discuss issues for both.

The NIPEC Corporate Plan is a high-level document which sets out the strategic direction of the organisation over the next four years. This Plan will be supported by the annual business plans, NIPEC's work plan, policies and business cases.

NIPEC recognises that the needs, experiences and priorities of the groups within each Section 75 category may vary substantially in relation to the work emanating from this plan. A top-level screening of the draft strategy will not do justice to giving consideration to the needs of all the Section 75 groups. Therefore, NIPEC is committed to undertaking screening of associated pieces of work as they are taken forward, for example the Business Plan 24/25, Professional Projects (as appropriate), policies and business cases (as appropriate). At this point NIPEC can identify that the following will need to be screened:

- Review the support required for practice experience for students;
- Nursing and Midwifery Excellence/ Assurance Framework;
- Nursing and Midwifery Leadership Framework;
- Communities of Practice;
- Strategic review of RNLD workforce model;
- Review of casting work and structures within Trusts;
- The career pathway for care homes;
- Business Plan 2025/26;
- NIPEC policies (where appropriate)

| Category | Needs and Experiences |
|-----------------|---|
| Gender | <p>Staff NIPEC has a predominantly female workforce. Females are more likely to have caring responsibilities than their male counterparts – see dependent section below.</p> <p>Registrants 92% of nurses and midwives on the permanent register in NI identify as female – see dependent section below.</p> <p>General Public None.</p> |

| | |
|-------------------|--|
| Age | <p>Staff, Registrants and General Public Older people may be less computer literate or have access to a computer and the internet.</p> <p>Younger people may prefer social media as a means of communication.</p> <p>There will be a need to provide age-appropriate information including the use of Plain English.</p> |
| Religion | <p>Staff and Registrants None.</p> <p>General Public In planning engagement events and meetings, there is a need to consider a community-neutral location/venue.</p> |
| Political Opinion | <p>Staff and Registrants None.</p> <p>General Public In planning engagement events and meetings, there is a need to consider a community-neutral location/venue.</p> |
| Marital Status | <p>Staff, Registrants and General Public Issues for those with dependents may be compounded for those who are single parents.</p> |
| Dependent Status | <p>Staff, Registrants and General Public There are potential issues for those with dependents and/or caring responsibilities who may require some flexibility in terms of timing and location of meetings or engagement events.</p> <p>Meetings should be planned well in advance to address accessibility issues for those with dependents. Assistance with travelling expenses should be provided, where applicable, in accordance with NIPEC's Service User, Carer and Stakeholder Reimbursement Guidelines.</p> |
| Disability | <p>Staff, Registrants and General Public Consideration may need to be given to buildings/venues for those with a physical disability. People with a learning disability or sensory impairment may require some form of</p> |

| | |
|--------------------|---|
| | <p>additional support when attending meetings or engagement events.</p> <p>Those with a learning disability may need communication to be tailored to their needs, including Plain English.</p> <p>People with a disability may require accessible formats to be made available.</p> <p>People with a disability may be less likely to have access to a computer or the internet.</p> |
| Ethnicity | <p>Staff None.</p> <p>Registrants The NMC require nursing and midwifery registrants to have a standard level of English. There may be other grades of staff e.g. health care assistant who may not be required to have the same standard. In these circumstances there is a need to ensure arrangements are in place to provide interpreting and translation on request.</p> <p>General Public There is a need to ensure that interpreting and translation arrangements are in place when requested by people whose first language is not English. This will be particularly important for communications utilising more complex medical/clinical terminology.</p> |
| Sexual Orientation | <p>Staff, Registrants and General Public There is no data which suggests that the needs and experiences of service users differ on the basis of sexual orientation.</p> |

2.4 Multiple Identities

Are there any potential impacts of the policy or decision on people with multiple identities? For example: disabled minority ethnic people; disabled women; young Protestant men and young lesbians, gay and bisexual people.

None.

2.5 Making Changes

Based on the equality issues you identified in 2.2 and 2.3, what changes did you make or do you intend to make in relation to the policy or decision in order to promote equality of opportunity?

In developing the policy or decision what did you do or change to address the equality issues you identified?

What do you intend to do in future to address the equality issues you identified?

Action Measures

An identification of different needs, experiences and priorities of any of the equality categories in relation to this action and what equality issues emerge from this.

Specify the Section 75 equality categories where there are different needs. Note if staff or service users.

Equality Screening NIPEC has identified areas of work to be screened as part of the Annual Business Planning process which supports the four-year Corporate Plan. These are:

- Review the support required for practice experience for students;
- Nursing and Midwifery Excellence/ Assurance Framework;
- Nursing and Midwifery Leadership Framework;
- Communities of Practice;
- Strategic review of RNLD workforce model;
- Review of casting work and structures within Trusts;
- The career pathway for care homes;
- Business Plan 2025/26;
- NIPEC policies (where appropriate)

People with a disability, those whose first language is not English

NIPEC's Accessible Formats Policy outlines how alternative formats should be considered by those developing information. The policy also provides guidance on how information and publications can be requested in alternative formats and recording and monitoring of such requests.

Children and Young People, Older People, People with Disabilities

NIPEC will provide alternative formats on request to meet the needs of older people without computer skills/access to computer/internet. Consideration will also be given to the provision of age-appropriate information to meet the needs of children and young people.

People whose first language is not English

As part of HSCNI, NIPEC can access the regional contract for interpreting, translation and transcription services.

People with a disability

The global COVID-19 pandemic highlighted the need for convenors of meetings to consider additional impact on Section 75 groups of the increased conduct of business using online platforms.

NIPEC's procedure for booking external venues for face to face meetings requires that venues should be fully accessible.

People with dependents; Political Opinion/Religious Belief

The global COVID-19 pandemic highlighted the need for convenors of meetings to consider additional impact on Section 75 groups of the increased conduct of business using online platforms.

NIPEC's procedure for booking external venues for events and meetings requires that timing and location and the need for a neutral venue/location should be considered.

NIPEC is a regional body and organises engagement events and meetings on a geographical spread where possible. Tele and video conferencing and other online platforms can be arranged for those unable to travel.

People with a disability; those whose first language is not English

NIPEC will continue to monitor requests for alternative format and/or language to inform future production of electronic and written communication.

People with a disability, those whose first language is not English, Children and Young People, Older People, People with dependents; Political Opinion; Religious Belief

A checklist has been developed to assist those organising engagement events and meetings and developing information. This will cover the need to take account of specific needs of the nine groups.

2.6 Good Relations

What changes to the policy or decision – if any – or what additional measures would you suggest to ensure that it promotes good relations? (refer to guidance notes for guidance on impact)

| Group | Impact | Suggestions |
|-------------------|---------------|--------------------|
| Religion | None | None |
| Political Opinion | None | None |
| Ethnicity | None | None |

(3) SHOULD THE POLICY OR DECISION BE SUBJECT TO A FULL EQUALITY IMPACT ASSESSMENT?

A full equality impact assessment (EQIA) is usually confined to those policies or decisions considered to have major implications for equality of opportunity.

How would you categorise the impacts of this decision or policy (refer to guidance notes for guidance on impact).

Please tick:

| | |
|-------------------|-------------------------------------|
| Major impact | <input type="checkbox"/> |
| Minor impact | <input checked="" type="checkbox"/> |
| No further impact | <input type="checkbox"/> |

Do you consider that this policy or decision needs to be subjected to a full equality impact assessment?

Please tick:

| | |
|-----|-------------------------------------|
| Yes | <input type="checkbox"/> |
| No | <input checked="" type="checkbox"/> |

Please give reasons for your decisions:

In developing the Corporate Plan, NIPEC recognises the need to consider any impact on Section 75 groups and that the needs, experiences and priorities of these groups may vary. The key actions detailed in each of the Annual Business Plans developed in support of the Corporate Plan will be individually equality screened where required as they are taken forward.

The screening of each Business Plan will identify a programme of screenings for the year based on planned activity during the year. Please see below:

- Review the support required for practice experience for students;
- Nursing and Midwifery Excellence/ Assurance Framework;
- Nursing and Midwifery Leadership Framework;
- Communities of Practice;
- Strategic review of RNLD workforce model;
- Review of casting work and structures within Trusts;
- The career pathway for care homes;

- Business Plan 2025/26;
- NIPEC policies (where appropriate)

In addition, decisions, policies and business cases (were appropriate) will all be equality screened.

All these screenings will be published on the BSO website-

<https://bso.hscni.net/directorates/people-and-place/655-2/equality-and-human-rights-screening/equality-screening/>

Mitigation has been put in place to address any equality issues identified in the screening of this Plan. It is not considered that subjecting this Plan to EQIA will present further opportunities to promote equality of opportunity.



(4) CONSIDERATION OF DISABILITY DUTIES

4.1 In what ways does the policy or decision encourage disabled people to participate in public life and what else could you do to do so?

| <i>How does the policy or decision currently encourage disabled people to participate in public life?</i> | <i>What else could you do to encourage disabled people to participate in public life?</i> |
|---|--|
| Where appropriate to the Strategic Priority and action required to achieve the desired Objective, The purpose of this liaison will be to obtain contact information to facilitate engagement with disability groups and their members. Where relevant there will be involvement and coproduction with disabled people over the 4 years of the Corporate Plan. | N/A |

4.2 In what ways does the policy or decision promote positive attitudes towards disabled people and what else could you do to do so?

| <i>How does the policy or decision currently promote positive attitudes towards disabled people?</i> | <i>What else could you do to promote positive attitudes towards disabled people?</i> |
|--|--|
| N/A | N/A |

(5) CONSIDERATION OF HUMAN RIGHTS

5.1 Does the policy or decision affect anyone’s Human Rights?
Complete for each of the articles

| ARTICLE | Yes/No |
|--|---------------|
| Article 2 – Right to life | No |
| Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment | No |
| Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour | No |
| Article 5 – Right to liberty & security of person | No |
| Article 6 – Right to a fair & public trial within a reasonable time | No |
| Article 7 – Right to freedom from retrospective criminal law & no punishment without law | No |
| Article 8 – Right to respect for private & family life, home and correspondence. | No |
| Article 9 – Right to freedom of thought, conscience & religion | No |
| Article 10 – Right to freedom of expression | No |
| Article 11 – Right to freedom of assembly & association | No |
| Article 12 – Right to marry & found a family | No |

| | |
|--|----|
| Article 14 – Prohibition of discrimination in the enjoyment of the convention rights | No |
| 1 st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property | No |
| 1 st protocol Article 2 – Right of access to education | No |

*If you have answered no to all of the above, please move on to **Question 6** on monitoring*

5.2 If you have answered yes to any of the Articles in 5.1, does the policy or decision interfere with any of these rights? If so, what is the interference and who does it impact upon?

| List the Article Number | Interfered with? Yes/No | What is the interference and who does it impact upon? | Does this raise legal issues? * Yes/No |
|-------------------------|-------------------------|---|---|
| | | | |

** It is important to speak to your line manager on this and if necessary seek legal opinion to clarify this*

5.3 Outline any actions which could be taken to promote or raise awareness of human rights or to ensure compliance with the legislation in relation to the policy or decision.

N/A

(6) MONITORING

6.1 What data will you collect in the future in order to monitor the effect of the policy or decision on any of the categories (for equality of opportunity and good relations, disability duties and human rights)?

| Equality & Good Relations | Disability Duties | Human Rights |
|---------------------------|-------------------|--------------|
| N/A | N/A | N/A |

Approved lead officer:

Jill Jackson

Position:

Head of Corporate Services

Date:

22nd February 2024

Policy/decision screened by:

Rita Marsden obo Jill Jackson

Please note that having completed the screening you are required by statute to publish the completed screening template, as per your organisation's equality scheme. If a consultee, including the Equality Commission, raises a concern about a screening decision based on supporting evidence, you will need to review the screening decision.

Please forward completed template to: equality.unit@hscni.net

If you require this document in an alternative format (such as large print, Braille, disk, audio file, audio cassette, Easy Read or in minority languages to meet the needs of those not fluent in English), please contact:

Email: enquiries@nipec.hscni.net Tel:
0300 300 0066

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