Equality and Human Rights Screening Template

Risk Management Strategy/Action Plan 2020-21

NIPEC 20/03

February 2021

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?

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

For information (evidence, data, research etc.) on the Section 75 equality groups see the Equality Portal - Screening Resources & Evidence.

(1) INFORMATION ABOUT THE POLICY OR DECISION

1.1 Title of policy or decision

Risk Management Strategy and Action Plan 2020-21

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)**

The purpose of a Risk Management Strategy and associated annual Action Plan is to establish a consistent and integrated organisational approach to the management of risk.

The primary aim of the strategy is manage the risks that may prevent the achievement of NIPEC's business objectives for 2020-21 and beyond. The key objectives of managing risks are to:

- provide assurance to the Council that risk control arrangements are effective
- establish and review the risks inherent in NIPEC's objectives
- establish and review effective communication of risk management across NIPEC
- protect the employees, visitors and assets of NIPEC.

This strategy provides guidance on the identification and assessment of risk, scoring and recording of risks, development of risk action plans and the process for escalation to and removal of risks from the corporate risk register.

NIPEC continues to adopt an approach to Risk Management appropriate to its business, scale and culture[1]. Our Risk Management arrangements have been reviewed to ensure that they comply with the Regional Risk Management framework adopted in 2018 (including a Regional Risk Matrix)[2] and recognised best practice guidance[3]. All HSC organisations have decided to adopt the 'spirit' of ISO 31000:2018 i.e. they will follow the principles of the standard, but will not be seeking accreditation. In addition, the NIPEC approach takes account of the 2020 version of the HM Government's updated 'Orange Book' (Principles and Concepts in the Management of Risk).

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[1] HM Government: The Orange Book: Management of Risk - Principles and Concepts 2020

[2] Proposal for a Health and Social Care Regional Model for Risk Management (including a Regional Risk Matrix, 2018

[3] HM Government: The Orange Book:2020

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

Members of NIPEC staff and Council, key stakeholders, actual or potential service users (general public).

NIPEC key stakeholders include:

- Nursing and Midwifery registrants
- Nursing and Midwifery Council (NMC)
- DoH
- HSC Trusts
- Higher Education Institutions, ie. Queens University Belfast, Ulster University, Open University
- Independent / Voluntary Sector
- Professional bodies / staff side organisations
- Other regional HSC organisations

General public

1.4 Other policies or decisions with a bearing on this policy or decision
- **what are they?**
- **who owns them?**

Departmental instruction

Health and Safety at Work Acts

Data Protection Act

Links to all other NIPEC policies, especially

- Corporate and Business Plans
- NIPEC Accessible Formats Policy
- Complaints Policy
- Health & Safety
- Business Continuity Plan
- ICT Security Policy
- Fraud Response Policy & Plan
- Policy on your right to raise a concern (Whistleblowing)
- Working Well Together
- Social Media Guidance
- Information Governance/Information Risk Management Policies
- Adverse Incident Policy
- Equality and Diversity

(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.

NIPEC staff data as at December 2020

NIPEC Council data as at March 2015

NMC Equality and Diversity UK data 2019/20

NI HSC Workforce Census as at March 2020

Census 2011

NI Health Survey (NISRA) 2017

NI Life and Times Survey (NILT) 2016

Office for National Statistics (ONS) Sexual Orientation UK 2017

The Gender Identity Research and Education Society (GIRES)

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.

NMC Equality and Diversity data relates to the 716,607 nurses and midwives who were on the NMC register on 31 March 2020

Category	*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?*
Gender	As at December 2020, current figure indicate 92.86% of NIPEC workforce is female and 7.14% is male whilst a survey of NIPEC Council members in March 2015, show 76.9% are female and 23.1% are male NMC Equality and Diversity data for the UK in 2019/20 reports 10.7% of registrants in the UK are male, whilst 89.3% are female. NI HSC Workforce Census as at March 2020 reports that females represented 92% of nursing and midwifery staff, with 57% working full time. Males represented 8% of the nursing and midwifery workforce, with 90% working full time.

	NI HSC Workforce Census also reports that 79% of HSC employees are female with 56% working full time. Most recent mid-year population estimates for NI was 1,851,600; male 49%; female 51% (NISRA, 2017) The Gender Identity Research and Education Society (GIRES) estimate the number of gender nonconforming employees and service users, based on the information that GIRES assembled for the Home Office (2011) and subsequently updated (2014): • gender variant to some degree 1% • have sought some medical care 0.025% • having already undergone transition 0.015% The numbers 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 young people 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). Applying GIRES figures to NI population (using NISRA mid-year population estimates for June 2018) N=1,881,600: • 18,816 people who do not identify with gender assigned to them at birth • 470 likely to have sought medical care • 282 likely to have undergone transition.
Age	As at December 2020, figures indicate NIPEC's workforce falls within the following age groups: 35-39 – 14.29% 40-44 – 0% 45-49 – 0% 50-54 – 21.43% 55-59 – 35.71% 60-64 – 21.43% >65 – 7.14% As at March 2015, figures indicate NIPEC's Council falls within the following age groups: 16-24 – 0 25-34 – 7.7% 35-49 – 38.5% 50-64 – 38.5%

	65-74 – 15.3%
	NMC Equality and Diversity data for the UK in 2019/20 reports 8.1% of registrants are aged 61 and over; 27% are aged 51-60; 25.9% are aged 41-50; 22.8% are aged 31-40; and 16.2% are aged between 21 and 30.
	NI HSC Workforce Census as at March 2020 reports that 43% of nursing and midwifery staff were aged under 40; 25% were aged 40-59; and 32% were over 50 years of age.
	Most recent mid-year population estimates for NI show (NISRA 2017):
	0-19 (inclusive) = 483,978 (26% of NI population)
	20-34 = 366,619 (19.7%)
	35-49 = 370,263 (19.9%)
	50-64 = 343,522 (18.4%)
	65-74 = 166,059 (8.8%)
	75-89 = 118,965 (6.4%)
	90+ = 12,731 (0.7%)
Religion	As at December 2020, figures for NIPEC workforce indicate 50% are Protestant, 28.57% are Catholic, 7.14% are neither and 14.29% are unknown.
	A survey of NIPEC Council members in March 2015 found 76.9% are Christian, 7.7% had no religious beliefs and 15.4% stated 'other' in their response.
	NMC Equality and Diversity data for the UK in 2019/20 reports 59.5% of registrants are Christian; 9.6% are either unknown or prefer not to answer; 25.5% state no religion; 1.6% are Muslim; 2% are Hindu/ Buddhist/Jewish/Sikh; and 1.7% other
	NI HSC Workforce Census for this is unavailable.
	Census 2011 figures for NI indicate:
	• 45.14% (817,424) are either Catholic or brought up as Catholic
	• 48.36% (875,733) are Protestant or brought up as Protestant
	• 0.92% (16,660) belong to or had been brought up in other religions and philosophies
	• 5.59% (101,220) neither belonged to, nor had been brought up in a religion.
	• Catholic - 40.76% (738,108)
	• Presbyterian Church in Ireland – 19.06% (345,150)
	• Church of Ireland – 13.74% (248,813)
	• Methodist Church in Ireland – 3% (54,326)
	• Other Christian (including Christian related) – 5.76% (104,308)
	• Other religions – 0.82% (14,849)

	- No religion – 10.11% (183,078) - Did not state religion – 6.75% (122,233)
Political Opinion	As at December 2020, the political opinion of 78.88% of NIPEC's workforce was unknown, whilst 21.42% of the workforce stated they were broadly Unionist, 'other' or did not wish to answer. Data available for NIPEC Council has been taken into consideration but has been withheld from publication as numbers are relatively small and individuals could be identified. There is no NMC Equality and Diversity UK data for this group. NI HSC Workforce Census for this is unavailable. NI Population (NILT) 2016: - Unionist - 29% - Nationalist - 24% - Neither -46% - Other/don't know - 2%
Marital Status	As at December 2020, figures indicate 71.43% of NIPEC's workforce is married or in a civil partnership, whilst 28.57% are unknown. A survey of NIPEC Council members in March 2015 found 84.6% are married or in a civil partnership, whilst 15.4% stated 'other' in their response. There is no NMC Equality and Diversity UK data for this group. NI HSC Workforce Census for this is unavailable. NI Population (NILT) 2016: - Single (never married) – 33% - Married and living with husband/wife or civil partner in a legally-registered civil partnership – 50% - Married and separated from husband/wife/civil partner – 3% - Divorced/Dissolution – 6% - Widowed – 8%
Dependent Status	Full data not available, however, the majority of staff are female plus anecdotal evidence indicates about half of NIPEC's workforce have some form of caring responsibilities for family member(s), eg. spouse, elderly parent(s), and/or children in full time education. A survey of NIPEC Council members in March 2015 found 75% had caring responsibilities for either a child, a dependent older person of a person(s) with a disability. There is no NMC Equality and Diversity UK data for this group. NI HSC Workforce Census for this is unavailable.

	Census 2011 figures for NI report:
	• 11.81% of the resident population provide unpaid care to family members, friends, neighbours
	• 3.11% provided 50 hours of care of more
	• 33.86% of households contain dependent children
	• 40.29% contained at least one person with a long-term health problem or a disability.
	NI Health Survey (2018) reports 17% of respondents were carers (21% of women and 13% of men).
Disability	As at December 2020, figures indicate 78.57% of NIPEC's workforce state they do not have a disability, 21.43% are unknown and none stated they have a disability.
	A survey of NIPEC Council members found 76.8% did not consider they had a disability, whilst 23.1% stated they did, citing either a mental health condition or a long standing illness such as cancer, HIV, diabetes, chronic heart disease or epilepsy.
	NMC Equality and Diversity data for the UK in 2019/20 reports 91.4% of registrants do not have a disability, 4.9% are unknown or prefer not to answer, and 3.7% state they do.
	NI HSC Workforce Census for this is unavailable.
	Census 2011 figures for NI report:
	• 20.69% (374, 668) regard themselves as having a disability or long – term health problem, which has an impact on their day to day activities.
	• 68.57% (1, 241709) of residents did not have long – term health condition.
	• Deafness or partial hearing loss – 5.14% (93, 078)
	• Blindness or partial sight loss – 1.7% (30, 785)
	• Communication Difficulty – 1.65% (29, 879)
	• Mobility of Dexterity Difficulty – 11.44% (207, 163)
	• A learning, intellectual, social or behavioural difficulty - 2.22% (40, 201)
	• An emotional, psychological - 5.83% (105, 573) or mental health condition
	• Long – term pain or discomfort – 10.10% (182, 897)
	• Shortness of breath or difficulty breathing – 8.72% (157, 907)
	• Frequent confusion or memory loss – 1.97% (35, 674)
	• A chronic illness (such as cancer, HIV, diabetes, heart disease or epilepsy. – 6.55% (118, 612)
	• Other condition – 5.22% (94, 527)
	• No Condition – 68.57% (1, 241, 709)
	NI Health Survey 2017 reports 42% have a long-standing illness (30%

	limiting; 12% non-limiting).
Ethnicity	Full data not available, however, anecdotal evidence suggests staff are white and/or of European origin.
	A survey of NIPEC Council members found 7.7% were from an ethnic background, whilst 92.3% are white.
	NMC Equality and Diversity data for the UK in 2019/20 reports 75.5% of registrants are white, 4.5% are unknown or prefer not to say, 8.5% Black/African/Caribbean, 8.6% Asian Bangladeshi/Chinese/ Indian/Pakistani, and 3% are mixed/multiple Ethnic/other Ethnic group.
	NMC note that just under 20% of registrants are from ethnic minority groups.
	NI HSC Workforce Census for this is unavailable.
	Census 2011 figures for NI report:
	• White – 98.21% (1, 778, 449)
	• Chinese – 0.35% (6, 338)
	• Irish Traveller – 0.07% (1, 268)
	• Indian – 0.34% (6, 157)
	• Pakistani – 0.06% (1, 087)
	• Bangladeshi – 0.03% (543)
	• Other Asian – 0.28% (5, 070)
	• Black Caribbean – 0.02% (362)
	• Black African – 0.13% (2354)
	• Black Other – 0.05% (905)
	• Mixed – 0.33% (5976)
	• Other – 0.13% (2354)
	• (1.8% 32,596 of the usual resident population belonged to minority ethnic groups)
	In addition, Census 2011 figures for NI report the following for language spoken by those aged 3 and over:
	• English – 96.86% (1, 681, 210)
	• Polish – 1.02% (17, 704)
	• Lithuanian – 0.36% (6, 249)
	• Irish (Gaelic) – 0.24% (4, 166)
	• Portuguese – 0.13% (2, 256)
	• Slovak – 0.13% (2, 256)
	• Chinese – 0.13% (2, 256)
	• Tagalog/Filipino – 0.11% (1, 909)
	• Latvian – 0.07% (1, 215)

	• Russian – 0.07% (1, 215) • Hungarian – 0.06% (1, 041) • Other – 0.75% (13, 018) The most recently published population-based data (NI Pooled Household Survey (NIPHS) tables, published 2017) suggests that in 2014/15 the ethnic breakdown in NI was: Ethnicity White – 98.2% (1,409,000); all other Ethnicities – 1.7% (26,000).
Sexual Orientation	Full data not available for NIPEC's workforce, but NI population estimate is 1.2% of the household population identifying as lesbian, gay or bisexual. A survey of NIPEC Council members found 100% are heterosexual. NMC Equality and Diversity data for the UK in 2019/20 reports that 1.7% of registrants identify as Gay or Lesbian, 88.5% are Heterosexual or straight, 0.7% are Bisexual, and 9% are unknown or prefer not to say. NI HSC Workforce Census for this is unavailable. An estimated 2.0% of the population (1.1 million people) identified themselves as lesbian, gay or bisexual (LGB). This comprised 1.3% identifying as gay or lesbian and 0.7% identifying as bisexual. The percentage in 2017 remains at similar levels to 2016. A further 0.6% identified as "other", meaning that they did not consider themselves to fit into the heterosexual or straight, bisexual, gay or lesbian categories. This proportion has increased since 2012 (0.3%). A further 4.1% refused, or did not know how, to identify themselves

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.

Category	*Needs and Experiences*
Gender	**Staff:** NIPEC has a predominantly female workforce and the majority of its Council members are female. Females are more likely to have caring responsibilities than their male counterparts – see dependent section below. **Registrants:** Almost 90% of NMC nursing and midwifery registrants in the UK are female – see dependent section below. **General Public:** None.
Age	**Staff:** Older people may be less likely to be computer literate and have access to a computer and the internet. **Registrants:** Younger people (registrants, service users and carers) may have a preference for social media (Facebook, Twitter, etc.) as a means of communication.

	General Public: The provision of age-appropriate information including the use of Plain English should be considered. There is, however, no data to suggest that the needs and experiences of service users differ on the basis of age.
Religion	*Staff/Registrants:* None *General Public:* In planning events and meetings, consideration should be given to a neutral venue/location or appropriate alternative option if a venue is used that is associated with one particular community. There is, however, no data to suggest that the needs and experiences of service users differ on the basis of religion.
Political Opinion	*Staff/Registrants:* None *General Public:* In planning events and meetings, consideration should be given to a neutral venue/location or appropriate alternative option if a venue is used that is associated with one particular community. There is, however, no data to suggest that the needs and experiences of service users differ on the basis of political opinion.
Marital Status	*Staff/Registrants/General Public:* There is no data to suggest that the needs and experiences of these groups differ on the basis of marital status.
Dependent Status	*Staff/Registrants/General Public:* There is a need to ensure equal access for female and part-time workers (the majority of whom tend to have dependants) in the delivery of training/meetings.
Disability	*Staff/Registrants/General Public:* Issues relating to accessible information for people with disabilities are considered in NIPEC's Accessible Formats Policy. People with a learning disability or sensory impairment may require some form of additional support when attending meetings or training events. There is a need to ensure equal access for people with a disability in terms of venue, online platform and materials for delivery of training may require accessible formats to be made available.
Ethnicity	*Staff/Registrants/General Public:* Issues relating to accessible information for people whose first language is not English are considered in NIPEC's Accessible Formats Policy.
Sexual Orientation	*Staff/Registrants/General Public:* There is no data to suggest that the needs and experiences of service users differ on the basis of Sexual Orientation.

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?*
Gender NIPEC will ensure that training times are suitable for female/part-time workers who are more likely to have dependents. **People with Dependents** NIPEC will ensure that training times are suitable for female/part-time workers who are more likely to have dependents. **People with a disability** NIPEC will ensure that training/meetings will continue to account for needs in terms of disability. Any on-line (e-learning) platforms will be compatible with assistive technologies. All requests for information in an alternative format such as easy read, braille etc will be considered in line with the NIPEC Accessible Formats Policy. **Ethnicity** All requests for information in an alternative language from English will be considered in line with the NIPEC Accessible Formats Policy. As part of HSCNI, NIPEC can access the regional contract for interpreting, translation and transcription services. NIPEC is a regional body and organises events and meetings on a geographical spread where required – it will also arrange for tele and video conferencing to facilitate those unable to travel.	A checklist has been developed to assist those organising regional events and meetings and developing information – this will take account of identified potential areas of inequality.

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	
Minor impact	✓
No further impact	

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

Please tick:

Yes	
No	✓

Please give reasons for your decisions:

In reviewing the existing Risk Management Strategy and taking forward the key actions, NIPEC recognises the need to consider any impact on Section 75 groups, and that the needs, experiences and priorities of these groups may vary.

Mitigation will be put in place to address any equality issues identified in the screening of this policy. It is not thought that subjecting this policy 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?

How does the policy or decision currently encourage disabled people to participate in public life?	What else could you do to encourage disabled people to participate in public life?
Where appropriate, NIPEC will liaise with BSO's Equality Unit in obtaining contact information to facilitate engagement with disability groups and their members.	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?

How does the policy or decision currently promote positive attitudes towards disabled people?	What else could you do to promote positive attitudes towards disabled people?
NIPEC has endorsed and issued to all staff guidance on the positive portrayal of people with a disability – this includes a checklist to assist those developing information. Communication materials developed in NIPEC will take this guidance and checklist into account.	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
1st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property	No
1st 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.

(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
NIPEC will continue to monitor requests for alternative formats to inform the development of information in various formats at the time of publication.		

Approved lead officer: Jill Jackson

Position: Head of Corporate Services

Date: 5th February 2021

Policy/decision screened by: Rita Marsden

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

Equality Unit/ BSO/ James House/ 2-4 Cromac Avenue/ Belfast/ BT7 2JA

Tel: 028 9536 3961

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:

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