

Equality and Human Rights Screening Template



Lead, Inspire & Improve: Quality Strategy 2024-28

Draft Equality Screening, as at 26th July 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?

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](#).

For advice and support on screening contact:
Equality Unit/ BSO /James House/ 2-4 Cromac Avenue/ Belfast/ BT7 2JA/
Tel: 028 9536 3961

(1) INFORMATION ABOUT THE POLICY OR DECISION

1.1 Title of policy or decision

Lead, Inspire & Improve - Quality 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)**

NIPEC first published its Quality Improvement Strategy in 2019 but the external context that had shaped that strategy has now changed with the rebuild following the pandemic, rising demand for services, constrained funded growth and increased stakeholder expectations. Therefore, as an organisation, we are now moving forward in our thinking of adopting Quality at a system level. In this new strategy – Lead, Inspire, Improve - we have set out our ambitions for quality in a way that is designed to be meaningful to our staff, our partners and our work.

This strategy describes a four-year journey to transform the way NIPEC manages change. Continuous improvement in quality and value will be accelerated by testing new approaches in order for us to deliver our work efficiently and effectively. Internal initiatives to improve teamwork and civility will encourage inclusivity and support among staff as well as openness with each other.

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

Those mainly affected by this strategy will be NIPEC staff but this will also impact on our stakeholders including:

- 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?

DOH Quality 2020 Strategy

Shaping our Future, A Vision for Nursing and Midwifery in NI: 2023-28

NIPEC Corporate plan

NIPEC Co-Production Strategy

NIPEC Communication and Engagement Strategy

Nursing and Midwifery Council (NMC) (2018) *The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates*. London: NMC.

(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.

NISRA 2022 Mid-year Population Estimates for Northern Ireland NISRA 2023

NI HSC Workforce Quarterly Workforce Statistics DoH 2023

NI HSC Workforce Census 2022

Carers NI 2022

NMC Annual Data Tables UK, NMC 2021/22

NI Health Survey NISRA 2021

NI Health Survey NISRA 2019

Office for National Statistics (ONS) 2019

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.

NB. *NMC Annual Data Table* for the United Kingdom (UK) 2021/22 data relates to the total number 744,685, of Nurse and Midwife registration type in 2022.

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><i>NMC Annual Data Report</i> for the United Kingdom (UK) 2022/23¹ reports: 89% on the NMC Nurse and Midwifery permanent register identify as female, whilst 11% identify as male.</p> <p>The NMC register Northern Ireland mid-year update 1 April-30 September 2023² reports:</p> <p>91.7% on the NMC Nurse and Midwifery permanent register identify as female, whilst 8.3% identify as male.</p> <p>Northern Ireland HSC Workforce Census, 2022 data for workforce population:</p> <p>The vast majority, 91% (22,068) of Nursing & Midwifery employees were female and 9% (2,064) were males, in 2022.</p> <p>Northern Ireland HSC Workforce Census as of March 2022 reports that females represented 91% of nursing and midwifery staff, with 59% working full time. Males represented 9% of the nursing and midwifery workforce, with 88% working full time.</p> <p>It was also noted that 78% of HSC employees are female with 58% working full time. The remaining 22% were male, with 83% working full time.</p> <p>Census 2021 population estimates for NI was 1,903,100; male 49%; female 51% (May 2022).</p>
Age	<p><i>NMC Annual Data Report</i> for the UK in 2022/23 reports:</p> <p>21.2% on the Nurse and Midwifery permanent register are aged 56 and over; 36.1% are aged 41-55; 42.7% are aged 21-40.</p> <p>There is no Northern Ireland specific data included in the annual data report or The NMC register Northern Ireland mid-year update 1 April-30</p>

¹ [The NMC register](#)

² [0130c-mid-year-data-report-ni-web.pdf \(nmc.org.uk\)](#)

	<p>September 2023.</p> <p>Northern Ireland HSC Workforce Census, 2022 reports that 46% of Nursing and Midwifery staff were aged under 40.</p> <p>Census 2021 population estimates published in May 2022 indicates NI population has increased to 1,910,500 – 335,400 people are aged over 65. Overall, estimates show 20.4% of the population are aged 0-15 years, 62.1% are aged 16-64 years and 17.6% are aged 65+ years.</p>
<p>Religion</p>	<p><i>NMC Annual Data Table</i> for the UK in 2022/23³ for permanent people on the register by religion or belief reports:</p> <p>57.4% as Christian; 0.5% as Buddhist; 1.7% as Hindu; 0.1% as Jewish; 2.2% as Muslim; 0.3% as Sikh; 1.6% as other; 31.5% as none; 4.5% prefer not to say; 0.2% unknown.</p> <p>NI Census population data, would indicate similar characteristics to NMC Nursing and Midwifery Equality and Diversity data, with Christian totalling 79.7% in NI and 68.6% in the UK. A further breakdown of the classification afforded to Christian does not appear to be reported in the NMC data. In addition, other religions i.e. Buddhist, Hindu, Jewish, Muslim, Sikh etc. would indicate to be higher in the NMC data than the NI Census data of 4.9% as opposed to 1.3%.</p> <p>NI HSC Workforce Census for this group is unavailable.</p> <p>NISRA Census 2021 figures for NI indicate the following breakdown of religion for the population of NI: 42.3% as Catholic; 16.6% as Presbyterian Church of Ireland; 11.5% as Church of Ireland; 2.4% as Methodist Church in Ireland; 6.9% as other Christian; 1.3% as other religions and 17.4 % as no religion.</p>
<p>Political Opinion</p>	<p>There is no NMC Equality and Diversity UK data for this group.</p> <p>NI HSC Workforce Census for this is unavailable.</p> <p>NISRA, NI: In Profile 3rd March 2021, reports the following political attitude to being Unionist or Nationalist, for the population of NI:</p> <ul style="list-style-type: none"> • Unionist -33% • Nationalist -23% • Neither- 39% <p>NI Population (NILT) 2021 following a survey of 1,397 adults aged 18 years or over indicated their political attitudes, by percentage of the sample as outlined below:</p> <ul style="list-style-type: none"> • Unionist - 32% • Nationalist - 26% • Neither - 38% <p>Other/don't know - 3%</p>

³ [Equality and diversity reports - The Nursing and Midwifery Council \(nmc.org.uk\)](https://www.nmc.org.uk/equality-and-diversity-reports)

Census 2021 figures for NI indicate:

National identity (nationality based) (Number – Percentage)

- British 814,600 42.8%
- Irish 634,000 33.3%
- Northern Irish 598,800 31.5%
- English 16,800 0.9%
- Scottish 10,200 0.5%
- Welsh 2,000 0.1%
- Other national identities 113,400 6.0%

National identity (person based) (Number – Percentage)

- British only 606,300 31.9%
- Irish only 554,400 29.1%
- Northern Irish only 376,400 19.8%
- British & Northern Irish only 151,300 8.0%
- Irish & Northern Irish only 33,600 1.8%
- British, Irish & Northern Irish only 28,100 1.5%
- British & Irish only 11,800 0.6%
- English only/Scottish only/Welsh only 16,200 0.9%
- Other combination of British/Irish/Northern Irish/English/Scottish/Welsh only 11,700 0.6%
- Other national identities 113,400 6.0%
- Polish only 23,900 1.3%
- Lithuanian only 11,900 0.6%
- Romanian only 7,100 0.4%
- Portuguese only 6,900 0.4%
- Bulgarian only 4,300 0.2%
- Indian only 4,100 0.2%

	<ul style="list-style-type: none"> • Other national identity with one or more of British/Irish/Northern Irish/English/Scottish/Welsh only 12,700 0.7% • Other national identities 42,600 2.2% <p>All usual residents 1,903,200 100.0%</p>
Marital Status	<p>There is no NMC Equality and Diversity UK data for this group. NI HSC Workforce Census for this is unavailable.</p> <p>Census 2021 figures for NI indicate: 45.59% (690, 509) of those aged 16 or over were married; 38.07% (576, 708) were single; 0.18% (2,742) were registered in civil partnerships (more than double since 2011); 6.02% (91,128) were either divorced or formerly in a civil partnership which is now legally dissolved; 6.36% (96, 384) were either widowed or a surviving partner from a civil partnership and 3.78% (57, 272) were separated (but still legally married or still legally in a civil partnership).</p>
Dependent Status	<p>There is no NMC Equality and Diversity UK data for this group. NI HSC Workforce Census for this is unavailable.</p> <p>Census 2021 figures for NI report: Outlined below; Provision of unpaid care (‘Provision of unpaid care’ covers looking after, giving help or support to anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age. It excludes any activities carried out in paid employment.)</p> <p>Northern Ireland All usual residents aged 5 and over 1,789,348 Percentage of usual residents aged 5 and over who provide:</p> <p>No unpaid care 87.58%</p> <p>1-19 hours unpaid care per week 5.63%</p> <p>20-34 hours unpaid care per week 1.38%</p> <p>35-49 hours unpaid care per week 1.57%</p> <p>50+ hours unpaid care per week 3.84%</p> <p>Carers NI <i>State of Caring</i> in 2022 report: There are over 290,000 people providing some form of unpaid care for a sick or disabled family member or friend in Northern Ireland – around 1 in 5 adults. (Carers UK 2022. Carers Week research report in 2022.)</p> <p>Of those participating in the survey:</p>

	<ul style="list-style-type: none"> • 82% identified as female and 17% identified as male. • 4% are aged 25-34, 17% are aged 35-44, 33% are aged 45-54, 31% are aged 55-64 and 14% are aged 65+. • 24% have a disability. • 98% described their ethnicity as white. • 28% have childcare responsibilities for a non-disabled child under the age of 18 alongside their caring role. • 56% are in some form of employment and 18% are retired from work. • 31% have been caring for 15 year or more, 16% for between 10-14 years, 25% for 5-9 years, 25% for 1-4 years, and 3% for less than a year. • 46% provide 90 hours or more of care per week, 13% care for 50-89 hours, 23% care for 20-49 hours, and 19% care for 1-19 hours per week. <p>67% care for one person, 25% care for two people, 5% care for three people and 3% care for four or more people</p>
Disability	<p><i>NMC Annual Data Table</i> for the UK in 2022/23 reports Nursing & Midwifery permanent register of total number of people by disability:</p> <p>94.1% do not have a disability; 3% do have a disability; 2.7% prefer not to say; 0.2% are unknown.</p> <p>NI HSC Workforce Census for this is unavailable.</p> <p>Health Survey NI (2018/19, published 2019 and updated 1st September 2022):</p> <p>41% longstanding illness (29% limiting and 13% non-limiting illness) Females (44%) were more likely than males (40%) to have a long-term condition.</p> <p>Limiting longstanding illness appears to increase with age with 13% reported in the 16-24 age-group and 56% in the over 75 age group.</p>
Ethnicity	<p><i>NMC Annual Data Report</i> for the UK in 2022/23 reports Nursing & Midwifery permanent register:</p> <p>69.4% on the permanent register are white; 14.6% are Asian or Asian British; 11.1% are Black, African, Caribbean or Black British; 0.9% are mixed or multiple ethnic groups; 1.1% are other ethnic group including Arab; 2.7% prefer not to say; 0.2% didn't respond.</p> <p>NI HSC Workforce Census for this group is unavailable.</p>

Census 2021 figures for NI report:

In the general population the 2021 Census indicated that 3.4% (65,600) of the usual resident population belonged to minority ethnic groups.

Ethnic Group

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%

Country of birth

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%

	<p>Europe (other EU countries) 67,500 3.5%</p> <p>Europe (other non-EU countries) 3,700 0.2%</p> <p>Other Countries in the World 53,100 2.8%</p> <p>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</p> <p>English 1,751,500 95.4%</p> <p>Main language not English 85,100 4.6%</p> <p>Polish 20,100 1.1%</p> <p>Lithuanian 9,000 0.5%</p> <p>Irish 6,000 0.3%</p> <p>Romanian 5,600 0.3%</p> <p>Portuguese 5,000 0.3%</p> <p>Arabic 3,600 0.2%</p> <p>Bulgarian 3,600 0.2%</p> <p>Other languages 32,200 1.8%</p> <p>All usual residents aged 3 and over 1,836,600 100.0%</p>
<p>Sexual Orientation</p>	<p><i>NMC Annual Data Table</i> for the UK in 2022/23 of people on the permanent register by sexual orientation report:</p> <p>90.1% identify as Heterosexual or straight; 0.2% as other and 0.2% as unknown or 5.8% prefer not to say; 1.7% as Bisexual; and 1.9% as Gay or Lesbian.</p> <p>NI HSC Workforce Census for this is unavailable.</p> <p>Census 2021 figures for NI indicate:</p> <ul style="list-style-type: none"> • Straight or heterosexual: 90.04% (1,363,859) • Gay or lesbian: 1.17% (17,713) • Bisexual: 0.75% (11,306) • Other sexual orientation: 0.17 (2,597) • Prefer not to say: 4.58% (69,307)

- Not stated: 3.3% (49,961)

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	<p>Almost 89.1% of NMC registrants in the UK are female.</p> <p>Females are more likely to have caring responsibilities than their male counterparts – see dependent section below.</p>
Age	<p>21.2% on the Nurse and Midwifery permanent register are aged 56 and over; 36.1% are aged 41-55; 42.7% are aged 21-40.</p> <p>Those in older age groups in may be less likely to be computer literate and have access to a computer or the internet.</p> <p>Those in younger age groups may prefer social media (Facebook, Twitter, Instagram etc.) 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>There is no data to suggest that there are specific needs or experiences arising within this category.</p>
Political Opinion	<p>There is no data to suggest that there are specific needs or experiences arising within this category.</p>
Marital Status	<p>Issues for those with dependents may be compounded for those who are single parents.</p>
Dependent Status	<p>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.</p>
Disability	<p>Some meetings to be conducted virtually and consideration may also need to be given to access to buildings/venues for meetings and events for those with physical disability. Those with sensory impairment may require some form of additional support when attending meetings and events or contacting NIPEC.</p>

Ethnicity	<p>The needs of those from ethnic minority groups may need to be considered, requiring effective communication skills by those acting as advocates and/or working with these client groups.</p> <p>The NMC has a language requirement stating that all non-EU trained nurses or midwives must complete the International English Language Test (IELTS) before they can be approved to practice in the UK. Therefore, it is not anticipated that language will be a barrier to accessing information and participating in this project.</p>
Sexual Orientation	<p>There is no data to suggest that the needs and experiences 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?

People with a disability and People whose first language is not English
 NIPEC will be creative with recruitment opportunities encouraging disabled people and those whose first language is not English to apply for posts advertised

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:

Mitigation has been put in place to address any equality issues identified in the screening of this strategy. 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?

<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>
<p>NIPEC`s Quality Strategy has no direct impact regarding disabled people participating in public life.</p> <p>NIPEC encourages the involvement and inclusion of disabled people through participation in programmes of work and encourages participation of disabled people in public life.</p> <p>This Strategy demonstrates NIPEC`s compliance with its duties under the above legislation.</p>	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>
This policy has no impact on the promotion of positive attitude towards disabled people	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
N/A	N/A	N/A	N/A

** 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: Brenda Carson
Position: Senior Professional Officer
Date: 01/07/2024
Policy/decision screened by: Brenda Carson

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:

Business Manager
NIPEC
4th Floor James House
2-4 Cromac Avenue
Belfast
BT7 2JA
Email: enquiries@nipec.hscni.net
Tel: 0300 300 0066