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 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](http://www.hscbusiness.hscni.net/services/1798.htm)
(1) INFORMATION ABOUT THE POLICY OR DECISION

1.1 Title of policy or decision

Corporate Plan 2017-21

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)

NIPEC’s Corporate Plan 2017-2021 details its purpose, focus, outcomes and direction for the period 2017-2021. It is a high level document, one which outlines NIPEC’s values and vision in leading and inspiring nurses and midwives to achieve and uphold excellence in professional practice.

The Corporate Plan also provides a basis for the organisation’s annual business plan which outlines its work programme aimed at promoting the highest standards of practice, education and professional development of nurses and midwives to facilitate the delivery of safe, effective, compassionate, person-centred services.

The Corporate Plan has been developed as a result of engagement with key stakeholders to appropriately reflect the priorities of nurses and midwives across Northern Ireland, working within a multi-disciplinary context.

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 staff, professional and corporate
- Nursing and Midwifery registrants
- Department of Health
- HSC Trusts and other regional HSC organisations
- Voluntary and independent sector
- Education providers, eg. QUB, Ulster University, Open University
- Staff side organisations
- Nursing and Midwifery Council

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

and Social Care

Department of Health (2016) *Health and Wellbeing 2026: Delivering Together*

Department of Health Social Services and Public Safety (2011) *Quality 2020, A 10 Year Strategy to Protect and Improve Quality in Health and Social Care in Northern Ireland.*

Department of Health Social Services and Public Safety (2012) *A Strategy for Maternity Care in Northern Ireland 2012 – 2018*


Department of Health Social Services and Public Safety (2008) *Improving the patient/ Client Experience*

Health and Social Care Board (2016) *eHealth and Care Strategy for Northern Ireland*


Nursing and Midwifery Council (2015) *The Code: Professional standards of practice and behaviour for nurses and midwives*

Northern Ireland Practice and Education Council (2013) *Promoting Good Nutrition Guidance and resources to support the use of MUST across all care setting*

Northern Ireland Practice and Education Council (2013) *Standards for Person Centred Nursing and Midwifery Record Keeping Practice*

Northern Ireland Practice and Education Council (2014) *Midwives and Medicines*


Health Equalities Framework (2013)

Agenda for Change project Team (2004) *The NHS Knowledge and Skills Framework (NHS KSF) and Development Review Process*


Department of Health, Social Services and Public Safety (2014) *Delivering Care: Nurse Staffing in Northern Ireland*

Moore, A (2015) *Thinking big on Quality Nursing Standard*

Cannon, F and McCutcheon, K (2016) *Nursing Revalidation* Journal of Perioperative Practice


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 31st March 2017
NMC Equality and Diversity proxy data 2014
Census 2011
NI HSC Workforce Census as at March 2016
Feedback from Chief Nursing Officer, DoH, NIPEC’s Sponsor Branch
Feedback from NIPEC Council members and professional and corporate services staff

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.

<table>
<thead>
<tr>
<th>Category</th>
<th>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?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>As at March 2017, current figure indicate 93.55% of NIPEC workforce is female and 6.45% is male whilst 76.9% of NIPEC Council are female and 23.1% are male. NMC Equality and Diversity data for 2014 reports 10% of registrants in the UK are male, whilst 90% are female. NI HSC Workforce Census as at March 2016 reports that females represented 92% of nursing and midwifery staff, with 55% working full time. Males represented 8% of the nursing and midwifery workforce, with 90% working full time. Census 2011 figures for NI report just over 50% of the 16-64 age group is female whilst 49.52% is male.</td>
</tr>
<tr>
<td>Age</td>
<td>As at March 2017, figures indicate NIPEC’s workforce falls within the following age groups: 35-39 – 3.23% 40-44 – 3.23% 45-49 – 22.58% 50-54 – 16.13%</td>
</tr>
</tbody>
</table>
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 2014 reports 7% are over 70, 28% are in their 50s, 31% are in their 40s, 22% are in their 30s and 12% are between 19 and 29.

NI HSC Workforce Census as at March 2016 reports that 39% of nursing and midwifery staff were aged under 40, while 40% of midwives were over 50 years of age.

Census 2011 figures for NI are as follows:

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percentage</th>
<th>Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-15</td>
<td>20.95%</td>
<td>(379,378)</td>
</tr>
<tr>
<td>16-19</td>
<td>5.61%</td>
<td>(101,589)</td>
</tr>
<tr>
<td>20-24</td>
<td>6.96%</td>
<td>(126,036)</td>
</tr>
<tr>
<td>25-29</td>
<td>6.85%</td>
<td>(124,044)</td>
</tr>
<tr>
<td>30-44</td>
<td>20.65%</td>
<td>(373,943)</td>
</tr>
<tr>
<td>45-59</td>
<td>19.21%</td>
<td>(347,867)</td>
</tr>
<tr>
<td>60-64</td>
<td>5.21%</td>
<td>(94,346)</td>
</tr>
<tr>
<td>65-74</td>
<td>8.04%</td>
<td>(145,593)</td>
</tr>
<tr>
<td>75-84</td>
<td>4.79%</td>
<td>(86,740)</td>
</tr>
<tr>
<td>85-89</td>
<td>1.17%</td>
<td>(21,187)</td>
</tr>
<tr>
<td>90 and over</td>
<td>0.56%</td>
<td>(10,141)</td>
</tr>
</tbody>
</table>

Religion

As at March 2017, figures for NIPEC workforce indicate 29.03% are Protestant, 16.13% are Catholic and 54.84% are undetermined.

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 2014 reports 55% of registrants are either unknown or prefer not to answer, 33% are Christian, 9% no religion, 2% other, and 1% Muslim.

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 Christina (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
Data available for NIPEC workforce and 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 data for this group.
NI HSC Workforce Census for this is unavailable.

Census 2011 figures for NI indicate:
• British only – 39.89% (722,353)
• Irish only – 25.26% (457,424)
• Northern Irish only – 20.94% (379,195)
• British and Northern Irish only – 6.17% (111,730)
• Irish and Northern Irish only – 1.06% (19,195)
• British, Irish and Northern Irish – 1.02% (1847)
• British and Irish only – 0.66% (11,952)
• Other – 5.00% (90,543)

Marital Status
As at March 2017, figures indicate 45.16% of NIPEC’s workforce is married or in a civil partnership, whilst 3.23% are divorced and 51.61% 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 data for this group.
NI HSC Workforce Census for this is unavailable.

Census 2011 figures for NI indicate:
• 47.56% of the resident population aged 16 and over are married
• 36.14% are single
• 0.09% are registered in same-sex civil partnerships
• 9.43% are divorced, separated or formerly in same-sex partnership
• 6.78% are either widowed or a surviving partner.

Dependent Status
Full data not available, however, the majority of staff are female plus anecdotal evidence indicates just over half of NIPEC’s total workforce have children in full time education and / or some form of caring responsibilities, eg. elderly parents.
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 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.

**Disability**

As at March 2017, figures indicate 41.94% of NIPEC’s workforce indicated they did not have a disability, 3.23% stated they had a disability, and 54.84% had not indicated whether they did or did not 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 2014 reports 56% of registrants are either unknown or prefer not to answer, 34% do not have a disability and 10% 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% (1,241,709) 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)

**Ethnicity**

Full data not available, however, anecdotal evidence suggests staff are white and/or 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 2014 reports 55% of registrants are known, 38% are White, 3% Black/Black British and 3% Asian/Asian British.

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% (2,354)
• Black Other – 0.05% (905)
• Mixed – 0.33% (5,976)
• Other – 0.13% (2,354)

(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)

Sexual Orientation

Full data not available for NIPEC’s workforce, but NI population estimate is 1 in 10.

A survey of NIPEC Council members found 100% are heterosexual.

NMC Equality and Diversity data for the UK in 2014 reports 59% are unknown/prefer not to answer, 40% are heterosexual and 1% are LGB&T.

NI HSC Workforce Census for this is unavailable.

There is variation in estimates of the size of the LGB&T population in Northern Ireland. Estimates are as high as 5-7% (65-90,000) of the adult population in Northern Ireland (based on the UK government estimate of between 5-7% LGB&T people in the population for the purposes of costing the Civil Partnerships Act). A similar proportion or more recently the Office of National Statistics estimate 1.5-2% which would be closer to 20-30,000 adults. This latter document is disputed by various LGB&T organisations.

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.

NIPEC recognises that the needs, experiences and priorities of groups within each Section 75 category may vary substantially in relation to the work emanating from the Corporate Plan. A top level screening of the Plan will not do justice to giving consideration to the
needs of all the Section 75 groups, and therefore NIPEC is committed to undertaking screening of all associated pieces of work as they are taken forward, including business plans and project initiation documents.

<table>
<thead>
<tr>
<th>Category</th>
<th>Needs and Experiences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>No known issues.</td>
</tr>
<tr>
<td>Age</td>
<td>Some potential issues for older registrants relating to use of and access to a computer and/or the internet.</td>
</tr>
<tr>
<td></td>
<td>Younger people (registrants, service users and carers) may have a preference for social media (Facebook, Twitter, etc.) as a means of communication.</td>
</tr>
<tr>
<td>Religion</td>
<td>No known issues.</td>
</tr>
<tr>
<td>Political Opinion</td>
<td>No known issues.</td>
</tr>
<tr>
<td>Marital Status</td>
<td>No known issues.</td>
</tr>
<tr>
<td>Dependent Status</td>
<td>No known issues.</td>
</tr>
<tr>
<td>Disability</td>
<td>People with disabilities may be less likely to have access to a computer or the intranet.</td>
</tr>
<tr>
<td></td>
<td>Some potential issues relating to access to electronic forms of communication and online documentation and use of same for people with disabilities.</td>
</tr>
<tr>
<td></td>
<td>Issues relating to accessible information for people with disabilities are considered in our Accessible Formats Policy.</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>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.</td>
</tr>
<tr>
<td></td>
<td>Issues relating to accessible information for people whose first language is not English are considered in our Accessible Formats Policy</td>
</tr>
<tr>
<td>Sexual Orientation</td>
<td>No known issues.</td>
</tr>
</tbody>
</table>

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.
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?

<table>
<thead>
<tr>
<th>In developing the policy or decision what did you do or change to address the equality issues you identified?</th>
<th>What do you intend to do in future to address the equality issues you identified?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Issues relating to engagement and communication are considered in the screening of NIPEC’s Engagement and Communication Strategy (2015). This can be viewed <a href="#">here</a>.</td>
<td>NIPEC is committed to undertaking screening of all associated pieces of work as they are taken forward, including business plans and project initiation documents. Organisation of external meetings with stakeholders who may have particular needs regarding timing and location of meetings, and access to buildings and information will be considered at the time of organising meetings, booking venues and developing information to be shared. In doing so, reference will be made to NIPEC’s procedure for booking of external and internal venues and its checklist for accessibility of meetings, venues and information.</td>
</tr>
</tbody>
</table>

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)

<table>
<thead>
<tr>
<th>Group</th>
<th>Impact</th>
<th>Suggestions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Religion</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Political Opinion</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>None</td>
<td>None</td>
</tr>
</tbody>
</table>
(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 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?

<table>
<thead>
<tr>
<th>How does the policy or decision currently encourage disabled people to participate in public life?</th>
<th>What else could you do to encourage disabled people to participate in public life?</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>
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?

<table>
<thead>
<tr>
<th>How does the policy or decision currently promote positive attitudes towards disabled people?</th>
<th>What else could you do to promote positive attitudes towards disabled people?</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

(5) CONSIDERATION OF HUMAN RIGHTS

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

<table>
<thead>
<tr>
<th>ARTICLE</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Article 2 – Right to life</td>
<td>No</td>
</tr>
<tr>
<td>Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment</td>
<td>No</td>
</tr>
<tr>
<td>Article 4 – Right to freedom from slavery, servitude &amp; forced or compulsory labour</td>
<td>No</td>
</tr>
<tr>
<td>Article 5 – Right to liberty &amp; security of person</td>
<td>No</td>
</tr>
<tr>
<td>Article 6 – Right to a fair &amp; public trial within a reasonable time</td>
<td>No</td>
</tr>
<tr>
<td>Article 7 – Right to freedom from retrospective criminal law &amp; no punishment without law</td>
<td>No</td>
</tr>
<tr>
<td>Article 8 – Right to respect for private &amp; family life, home and correspondence.</td>
<td>No</td>
</tr>
<tr>
<td>Article 9 – Right to freedom of thought, conscience &amp; religion</td>
<td>No</td>
</tr>
<tr>
<td>Article 10 – Right to freedom of expression</td>
<td>No</td>
</tr>
<tr>
<td>Article 11 – Right to freedom of assembly &amp; association</td>
<td>No</td>
</tr>
<tr>
<td>Article 12 – Right to marry &amp; found a family</td>
<td>No</td>
</tr>
<tr>
<td>Article 14 – Prohibition of discrimination in the enjoyment of the convention rights</td>
<td>No</td>
</tr>
<tr>
<td>1st protocol Article 1 – Right to a peaceful enjoyment of possessions &amp; protection of property</td>
<td>No</td>
</tr>
<tr>
<td>1st protocol Article 2 – Right of access to education</td>
<td>No</td>
</tr>
</tbody>
</table>
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?

<table>
<thead>
<tr>
<th>List the Article Number</th>
<th>Interfered with? Yes/No</th>
<th>What is the interference and who does it impact upon?</th>
<th>Does this raise legal issues?* Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

* 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)?

<table>
<thead>
<tr>
<th>Equality &amp; Good Relations</th>
<th>Disability Duties</th>
<th>Human Rights</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>None</td>
<td>None</td>
</tr>
</tbody>
</table>

Approved lead officer: Angela McLernon

Position: Chief Executive

Date: July 2017

Policy/decision screened by: Janet Hall, Corporate Services Manager
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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Email: enquiries@nipec.hscni.net
Tel: 0300 300 0066

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