Equality, Fairer Scotland and Children's Rights Impact Assessment

Transforming Roles District Nursing Paper and Framework Refresh

NMAHP Directorate, Workforce Education and Career Development Team.

Date Report Completed: June 2026

Date Report Reviewed: August 2026

Introduction

This Equality Impact Assessment (EQIA) has been completed in relation to the Public Service Delivery Scotland (PSDS) commission Healthcare Science Support Worker Career Framework.

Equality Impact Assessment is a process that helps us to consider how our work will meet the three parts of the Public Sector Equality Duty (PSED). It is an important way to mainstream equality into our work at PSDS and to help us:

- Take effective action on equality
- Develop better policy, technology, education and learning and workforce planning solutions for health, social care and a wide range of our partners, stakeholders and employees
- Demonstrate how we have considered equality in making our decisions. This EQIA aims to help PSDS consider how

This EQIA aims to help PSDS assess how our work on the District Nurse framework impacts individuals with protected characteristics, in line with the Public Sector Equality Duty (PSED). For example:

- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010.
- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

This EQIA will consider and assess how this work meets the PSED and if or how it impacts individuals with protected characteristics. The protected characteristics covered by this EQIA are defined in the Equality Act 2010 as age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation.

Purpose/objective of proposed work

The proposal and objective of the work is to develop and transform the district nursing team roles within NHS Scotland, so it is a nationally consistent, sustainable, and progressive role that meets the current and future needs of Scotland's health and care system. The Chief Nursing Officer has committed to maximising the contribution of the Nursing, Midwifery and Health Professions (NMAHP) workforce and pushing the traditional boundaries of professional roles, and this paper provides the specific direction for district nursing teams as part of that Transforming Roles programme.

The core objective is to reposition the district nursing team as a patient-centred, specialist-generalist service which reduces variation in practice and ensures individuals and their families receive high-quality, coordinated care in their own homes and communities. The work proposes that district nursing teams lead on managing complexity, anticipatory care, public health, end-of-life care, intermediate care, and case management, and that they work across organisational boundaries with general practice, social care, and third-sector

partners. This aims to optimise primary care provision, reduce avoidable hospital admissions, and help people remain at home in good health and as independently as possible for longer while receiving high-quality care.

The proposal also includes creating clear, nationally consistent education and career pathways for all levels of the district nursing team, with defined levels of practice and clarity around roles and responsibilities. This is intended to address workforce pressures, workload challenges, and the need for stronger leadership capability in community nursing, while supporting a more sustainable model that aligns with national priorities around frailty, unscheduled care, and seven-day services.

Aim of the Commission

The aim of this work is to develop and transform the district nursing team role in NHS Scotland so it delivers person-centred, safe, and effective community nursing services that meet current and future health and care needs. The work emphasises the teams leadership role in anticipatory, palliative, and end-of-life care, and seeks to create a nationally consistent model that reduces variation in practice.

The clear outcomes of this transformation work include a district nursing team that provides holistic health and social care assessments for all patients, delivers relationship-based care, and offers a single point of contact and coordination for patients, carers, and families. The role is designed to deliver dynamic, flexible care centred on patient need whether at home or in the wider community environment.

The intended outcomes also include all levels of the district nursing team engaging with patient safety and continuous quality-improvement initiatives aimed at improving care and reducing variation and harm, while working with patients and their families to deliver interventions that prevent ill health and enable self-management. Early evaluation of the district advanced nurse role shows transformational impact across the four pillars of advanced practice clinical practice, research and development, facilitation of learning, and leadership, optimising primary care provision and reducing avoidable hospital admissions for patients on a district nursing caseload.

The work aims to ensure individuals and their families receive high-quality care while addressing workforce pressures, workload challenges, and the need for stronger leadership capability in community nursing. Ultimately, the transformation supports national priorities around frailty and unscheduled care by directing care away from the hospital and towards primary care in a more effective and flexible way.

Assessment

Characteristic	Potential Impact	Rationale
Age	No Impact	Alternative formats are available, for example, print, QR codes) recorded content with transcripts.
Disability	No Impact	No discrimination/disadvantage. Accessibility ensured for sensory, neurodiverse, mental/physical health needs; alternative formats available.
Gender Reassignment	No Impact	We are not aware of any specific issues relating to this protected characteristic
Race	No Impact	The workstreams incorporate examples of good practice, which provide a representation of the general population
Religion and Belief	No Impact	The workstreams incorporate examples of good practice, which provide a representation of the general population
Gender	No Impact	We are not aware of any specific issues relating to this protected characteristic. The Framework includes examples that reflect gender
Sexual Orientation	No Impact	We are not aware of any specific issues relating to this protected characteristic
Marriage and Civil Partnership	No Impact	We are not aware of any specific issues relating to this protected characteristic
Pregnancy and Maternity	No Impact	We are not aware of any specific issues relating to this protected characteristic

Note:

- Appendix 1: Additional breakdown of characteristics of the Scottish workforce
- Appendix 2: Impact on equality & socio-economic disadvantage
- Appendix 3: Impact on UNCRC rights

Next Steps

The Equality Impact Assessment noted above, and in appendices 1,2 has informed the following actions:

Issue or risk identified	Action	Responsibility	Timescale	Resource Required
Lower digital skills in higher age groups	Resources designed inclusively (digital + print/alternative formats, QR codes for mobile access, PowerPoints, recorded content with captions/ transcripts	Commission Steering Group	Ongoing	Print materials budget; transcription software
Communication channels challenging via cascade	Multi-channel promotion (board comms, networks, newsletters, Teams meetings, practice education teams	Steering Group	Ongoing	Digital platforms access; meeting facilitation

Potential Impact

Through direct consultation with stakeholders and Commission groups, we have identified current and future actions detailed in the action table above to proactively mitigate any potential disparities in outcomes for individuals with protected characteristics and those from diverse populations. We have also carefully considered children's rights, our corporate parent responsibilities, and the Fairer Scotland Duty, determining no known relevance to children's rights, given the Commission's focus

This impact assessment concludes there is currently no risk of unlawful discrimination, with built-in measures to advance equality of opportunity and foster good relations between those sharing protected characteristics and those who do not. These commitments will be dynamically reviewed as new workstreams, resources, and stakeholder feedback emerge, ensuring the EQIA remains fully current and proportionate

Monitoring

Ongoing monitoring of the actions outlined in this EQIA will be robust and multifaceted, forming a standing agenda item at user forum meetings to ensure consistent oversight and accountability. The Commission Steering Group will conduct regular reviews as work progresses and new commissions are implemented, adapting to emerging needs and

evidence in real time. This will be complemented by ongoing collaboration with NHS Boards through established advisory groups and educator networks, fostering shared insights and localised implementation support. Additionally, analysis of national district workforce datasets will provide a data-driven foundation for tracking impacts, identifying trends in equality outcomes, and informing future refinements to the framework and resources

Sign-Off

Director: Karen Wilson

Date: 10 August 2026

Version: 1

Appendix 1

NHS Scotland Nurses, Midwives & AHPs Workforce Demographics (Sep 2023)

Total staff: 79,105.6 WTE

Protected Characteristic	Breakdown	Key Notes
Age	Median: 43 years 19.7% aged 55+	Significant ageing workforce; digital inclusion measures critical
Gender	87.4% female 12.6% male	Highly gender-segregated;
Religion/Belief	32.1% none 15.2% Church of Scotland 10.9% Roman Catholic 6.9% Christian 20.7% not known 10.1% declined 2% other (Buddhist 0.3%, Hindu 0.6%, Muslim 1.1%, etc.)	46.9% unknown/declined limits analysis

Race/Ethnicity	57% White Scottish 9.2% White British 15.6% not known 8.5% declined 2.9% Asian 0.8% African 0.5% mixed 0.2% Caribbean/Black	24.1% unknown/declined; under-representation of ethnic minorities
Sexual Orientation	64.1% heterosexual 21.4% not known 11.7% declined 1.5% gay/lesbian 1% bisexual 0.3% other	33.1% unknown/declined
Transgender Status	53.6% not transgender 0.1% transgender 36% unknown 10.3% declined	46.3% unknown/declined
Disability	60.6% no disability 1.4% have disability 30% unknown 8% declined	38% unknown/declined: very low disclosure

Footnote

High non-disclosure rates reflect optional reporting; trends inform direction but not statistical significance

Appendix 2: Impact on equality & socio-economic disadvantage

Guide: Using the evidence you have collected, explain if your proposal could:

- Be discriminatory and/ or put a group of people sharing one of these characteristics at a disadvantage for a reason connected to that characteristic.
- Have a positive impact on reducing inequalities experienced by groups of people sharing these characteristics.

Note – answer yes/ no and if yes provide brief reasons.

Relevant group	**Could your work result in unlawful discrimination?**	**Could your work put people at a disadvantage/ make their lives worse?**	**Can your work advance equality of opportunity [reduce disadvantage, meet needs, increase participation]**	**Can your work foster good relations? [reduce prejudice + increase tolerance]**
People in different age groups	No	No	Yes All resources are in digital format. Evidence suggests that there is a divide in digital literacy in older age ranges. The use of alternative formats where applicable	Yes Raising awareness of knowledge, skills and behaviours expected when supporting colleagues or users of services.

Disabled people	No	No	Yes We have considered how outputs from the commission work are accessible for disabled people – sensory impairments, neurodiverse, mental health, and physical health.	Yes Incorporate images, case studies and examples of people with different protected characteristics and from diverse population groups.
Trans and non-binary people	No	No		The Transforming Roles DN paper is based on NHS Scotland values.
People who are pregnant or on maternity leave	No	No		The Transforming Roles DN paper is based on NHS Scotland values.
People from different ethnic backgrounds	No	No		The Transforming Roles DN paper is based on NHS Scotland values.
People with religious or protected beliefs	No	No		The Transforming Roles DN paper is based on NHS Scotland values.

Men and women [This may include carers, because many are women.]	No	No		The Transforming Roles DN paper is based on NHS Scotland values.
People who are heterosexual, lesbian, gay or bisexual	No	No		The Transforming Roles DN paper is based on NHS Scotland values.
People who are married or in a civil partnership	No	No		The Transforming Roles DN paper is based on NHS Scotland values.
Care-experienced people	NOTE - there is no legal protection from discrimination on the basis of care experience.	No		The Transforming Roles DN paper is based on NHS Scotland values.
People living in remote, rural and island communities	NOTE - there is no legal protection from discrimination on the basis of living in a remote, rural or island community.	No		The Transforming Roles DN paper is based on NHS Scotland values.

People experiencing employment inequalities caused by socio-economic disadvantage [This may include people living in different or difficult circumstances, such as people experiencing homelessness, who are in prison or ex-offenders, people with addictions, ex-service personnel/veterans and people involved with prostitution.	NOTE - there is no legal protection from discrimination in employment on the basis of socioeconomic disadvantage.	No		The Transforming Roles DN paper is based on NHS Scotland values.

Appendix 3: Impact on UNCRC rights

UNCRC right	How will your work limit or restrict this right?	How will your work progress this right?	Are any groups of children particularly impacted?
3 – best interests of the child	No known relevance		
4 – making rights real	No known relevance		
5 – family guidance as children develop	No known relevance		
6 – life, survival and development	No known relevance		
7 – name and nationality	No known relevance		
8 – identity	No known relevance		
9 – keeping families together	No known relevance		
10 – contact with parents across countries	No known relevance		
11 – protection from kidnapping	No known relevance		
12 – respect for children's views	No known relevance		
13 – sharing thoughts freely	No known relevance		
14 – freedom of thought and religion	No known relevance		
15 –freedom of association and peaceful assembly	No known relevance		
16 – protection of privacy	No known relevance		

17 – access to information	No known relevance		
18 – responsibility of parents	No known relevance		
19 – protection from violence	No known relevance		
20 – children without families	No known relevance		
21 – children who are adopted	No known relevance		
22 – refugee children	No known relevance		
23 – disabled children	No known relevance		
24 – enjoyment of the highest attainable standard of health	No known relevance		
25 – review of a child's placement	No known relevance		
26 – social and economic help	No known relevance		
27 – food, clothing and safe home	No known relevance		
28 – access to education	No known relevance		
29 – aims of education	No known relevance		
30 – minority culture, language and religion	No known relevance		
31 - rest, play, culture, arts	No known relevance		
32 – protection from harmful work	No known relevance		

33 – protection from harmful drugs	No known relevance		
34 – protection from sexual abuse	No known relevance		
35 – prevention of sale and trafficking	No known relevance		
36 – protection from exploitation	No known relevance		
37 – children in detention	No known relevance		
38 – protection in war	No known relevance		
39 – recovery and reintegration	No known relevance		

We all have a legal responsibility to ensure the work we do does not adversely affect children's rights, both directly and indirectly. Children's rights are now enshrined in Scottish law through the UNCRC (Incorporation) (Scotland) Act 2024, which places a legal duty on public authorities not to act incompatibly with the UNCRC requirements. If you do not consider that your work affects children and young people under 18 do not complete this section. You should state that you have made this decision in the summary of your impact assessment (See Section 4 above).

If your proposal affects children and young people, use the evidence you have collected to explain how your proposal could impact children's rights. Not all UNCRC rights may apply to your proposal. If this is the case, simply say 'Not relevant' or 'no known relevance'