

# Equality Impact Assessment Report Template

Title: Containing and Controlling Antimicrobial Resistance: A Knowledge and Skills Framework for Health and Social Care in Scotland

NES directorate or department: NMAHP

Date Report: November 2025

## Introduction

Equality, Fairer Scotland and Children's Rights Impact Assessment help us to make good decisions. It's a process to help us think about how we can:

- Take action to advance equality
- Eliminate unlawful discrimination, harassment and victimisation
- Foster good relationships
- Develop better technology, education and learning and workforce planning solutions to contribute to Scotland's health and care
- Support us to be a diverse and inclusive employer
- Demonstrate how we have considered equality and children's rights in making our decisions

Impact Assessment helps us to consider how our work will meet the Public Sector Equality Duty and it is an important way to mainstream equality into our work at NES.

## Background

Antimicrobial resistance (AMR) is one of the greatest threats to national and global public health. AMR occurs when bacteria, viruses, fungi and parasites no longer respond to antimicrobial medicines, making infections harder or sometimes impossible to treat. In 2019, bacterial AMR was directly responsible for an estimated 1.27 million deaths globally and contributed to 4.95 million deaths (Antimicrobial Resistance Collaborators, 2022).

In response to this global public health emergency, the Scottish Government commissioned NHS Education for Scotland (NES) to develop Containing and Controlling Antimicrobial Resistance: A Knowledge and Skills Framework for Health and Social Care in Scotland. This National framework has been developed by the NES Infection Prevention and Control (IPC) Education Team, in collaboration with the Scottish Antimicrobial Prescribing Group (SAPG), Glasgow Caledonian University (GCU) and wider stakeholders. It is designed to complement existing education resources and support coordinated action to reduce AMR across health and social care.

The framework aims to support non-specialist health and social care staff across a range of roles and settings to develop the knowledge, skills and behaviours required to contribute to antimicrobial stewardship (AMS) and optimise antimicrobial use. It provides practical guidance that spans the care journey and demonstrates how everyone can play their part in reducing AMR—whether through infection prevention, early recognition of infection, or supporting safe and appropriate antimicrobial use.

This framework will also be useful for those new to a specialist post in AMS/IPC. Specialists/leaders will also find the framework useful to identify learning needs in their wider team and for signposting or directing those who are thinking about working in the field or are interested in developing specialist competencies. All AMS/IPC/Health Protection specialists should be familiar with this framework.

This multidisciplinary framework supports the following national and UK strategies:

- [The Infection Prevention Workforce: Strategic Plan 2022–2024](#)
- [Scottish Healthcare Associated Infection \(HCAI\) Strategy 2023–2025](#)
- [UK 5-Year Action Plan for Antimicrobial Resistance 2024–2029](#)

The framework was published August 2025 on the [Antimicrobial Resistance and Stewardship Zone](#) on Turas Learn, making it freely accessible to individuals and organisations across health and social care. A [web-version of the framework](#) that is more accessible on mobile phones is also available:

[Antimicrobial Resistance and Stewardship Zone](#)

[Web version of the framework](#)

## Equality Outcomes

This EQIA is relevant to the following [NES Equality and Diversity Outcomes](#):

**Outcome 1:** *“Health inequalities are mitigated and, where possible, reduced or prevented through the provision of opportunities for healthcare staff to enhance relevant skills and knowledge.”* The Framework supports this outcome by providing accessible, evidence-based education on AMR and AMS for non-specialist health and social care staff across Scotland. By equipping staff with the knowledge, skills, and behaviours to contain and control AMR, the framework promotes safe and effective care, reducing health inequalities and improving outcomes for vulnerable and underserved populations.

**Outcome 4:** *“Retention and career development are improved for people who take breaks from training or career progression through career advice, induction and returner programmes, flexible training, retainer schemes and support for performance.”* The framework provides a structured, flexible approach to learning that supports continuous professional development for staff at different stages of their careers, including those returning to practice. It can be used in personal development reviews and career planning, helping staff build confidence and skills in a way that supports retention and progression in health and social care roles.

**Outcome 7:** *“Access to learning is improved through enabling flexible learner access on any device; delivering resources built to best practice accessibility standards; and providing appropriate and relevant digital literacies development for learners.”* The framework has been published on the Turas Learn platform in a dedicated Antimicrobial Resistance and Stewardship Zone and as a web version more accessible on mobile phones, ensuring free and flexible access to staff and students across health and social care. It has been designed and delivered in line with accessibility standards and can be accessed on multiple devices, supporting inclusive digital learning.

## **Potential for Reducing Inequalities**

The development and implementation of this framework has the potential to reduce inequalities and improve outcomes by:

- **Improving access to education:** The framework will be freely accessible online without login requirements, ensuring equitable access for staff in all health and social care settings, including those in remote, rural, or hard-to-reach areas. A document version can be downloaded to allow for access without an internet connection.
- **Supporting diverse learning needs:** Content follows best practice digital accessibility standards and has been designed for clarity and ease of navigation, ensuring usability for staff with disabilities and those with varying levels of digital literacy.
- **Reducing variation in practice:** Providing a single, national framework helps to standardise knowledge and skills in antimicrobial stewardship across Scotland, reducing inconsistencies in antimicrobial use and supporting safe, equitable care.

- **Supporting career development:** The framework provides a structured tool for personal development planning, appraisal, and workforce planning, helping staff with protected characteristics and those returning from career breaks to identify learning needs and progress in their roles.
- **Enhancing health outcomes:** By supporting appropriate use of antimicrobials and embedding AMS principles into everyday practice, the framework will promote prevention of infections, containment of antimicrobial resistance, and protect the effectiveness of antimicrobials, thus improving population health and patient safety.

## Evidence

To inform this Equality Impact Assessment (EQIA), a range of qualitative and quantitative evidence was considered:

**Stakeholder Engagement:** Engagement with stakeholders across health and social care included the Scottish Antimicrobial Prescribing Group (SAPG), Antimicrobial Resistance and Healthcare Associated Infection (ARHAI) Scotland, Glasgow Caledonian University, NHS Boards, social care and housing providers, and higher education partners. Input was gathered through a Short Life Working Group (SLWG) with representation from national bodies, NHS organisations, professional networks, and social care partners. The process was further strengthened by a Delphi study supported by the Safeguarding Health through Infection Prevention (SHIP) research group at Glasgow Caledonian University, followed by a structured Scotland-wide consultation period. This ensured the framework reflected expertise, consensus, and perspectives from a wide range of disciplines and care settings.

**Mapping of existing internal and external AMR/AMS learning resources:** A national mapping exercise identified 345 existing AMR/AMS learning resources, of which 79 aligned with the framework. Findings highlighted duplication across NHS Boards, significant gaps in areas such as diagnostic stewardship and clinical decision-making, and barriers including digital access, lack of assessment/accreditation, and time pressures. The findings supported the development of further plans for educational resources to support the framework.

### Workforce Data Analysis:

- [NHS Scotland Workforce Statistics 2025](#): Provided demographic data, including gender distribution, age profile, and workforce composition, ensuring the framework is relevant to a diverse and ageing workforce.

- [iMatter Health and Social Care Staff Experience Survey 2024](#): Provided demographic and experiential data across health and social care, including disability, gender, and ethnicity. These insights highlighted workforce diversity and informed the development of an accessible and inclusive framework.
- [Scottish Social Services Council \(SSSC\) Workforce Data Report 2023](#): Offered demographic insights into the social care workforce, including gender balance and age distribution, ensuring inclusivity across sectors.

These represent the most current national workforce datasets available at the time of assessment.

**Policy and Literature Context:** The framework is aligned with national and international priorities, including:

- The Infection Prevention Workforce: Strategic Plan 2022–2024
- Scottish Healthcare Associated Infection (HCAI) Strategy 2023–2025
- UK 5-Year Action Plan for Antimicrobial Resistance 2024–2029
- World Health Organization (WHO) guidance (2014, 2016, 2023, 2024), which identifies antimicrobial resistance as one of the greatest global public health threats and emphasises the role of antimicrobial stewardship and workforce education.

**Internal Working Group Discussions:** A dedicated working group met regularly to review evidence, identify potential equality impacts, and ensure the EQIA reflected all relevant considerations.

#### **Identified Gaps:**

- Variation in AMR/AMS learning provision across NHS Boards and between health and social care
- Limited tailored resources for social care and support staff
- Limited assessment and accreditation opportunities for AMR/AMS learning
- Ongoing need for flexible, blended, and accessible learning to meet diverse workforce needs

## Assessment

We have considered how this work will impact on the Public Sector Equality Duty. This includes how it might affect people differently, taking account of protected characteristics and how these intersect, including with poverty and low income. This is important as a national NHS Board in our work to address health inequalities.

We have also considered children's rights where appropriate and our role as a corporate parent. While this work does not directly impact children's rights, as it is focused on the education of health and social care staff, effective AMR and AMS education strengthens the workforce and improves public health. This contributes to safer health and social care environments, reducing infection risks for all, including children.

Our assessment is set out below:

Protected Characteristic / Population Group	Any Differential Impact?	Reason
Age	Neutral	The framework is designed to be accessible to learners of all ages. Its self-directed and digital format allows flexibility for staff with different work-life responsibilities.
Disability (physical, sensory, learning disabilities, neurodiversity, communication needs, mental health)	Positive	The framework is published on Turas Learn and designed in line with NES accessibility standards (e.g., screen reader compatibility, clear navigation). It is available in two accessible formats (mobile-friendly and full Word document), enhancing usability for those with specific accessibility needs.
Gender Reassignment	Neutral	No differential impact is anticipated. The framework is designed to be inclusive and respectful of all gender identities. Language and content will be periodically reviewed to ensure respectful use of pronouns and inclusivity.
Race / Ethnicity	Neutral	The framework content is evidence-based, culturally sensitive, and reflective of Scotland's diverse workforce. While no specific differential impact is anticipated,

		NES is committed to promoting inclusivity and anti-racist practice in its education.
Religion / Belief (including none)	Positive	The framework is respectful and inclusive of all religious beliefs. The relevance of religion/beliefs in the context of AMR/AMS has been specifically included to alert users of the need to consider this when looking after those in care.
Sex	Neutral	No differential impact is anticipated. The framework is designed to be inclusive and accessible for all genders.
Sexual Orientation	Neutral	No differential impact is anticipated
Marriage / Civil Partnership	Neutral	No differential impact is anticipated for this protected characteristic.
Pregnancy and Maternity	Neutral	No differential impact is anticipated. The framework's self-paced, flexible design allows staff on maternity leave or with caregiving responsibilities to engage with the content at a time that suits them.
Socio-economic Status	Neutral	The framework is freely accessible on Turas Learn without login requirements, reducing barriers for staff in lower-paid roles or those with limited digital access. The availability of two formats (mobile-friendly and full Word document) provides flexibility for users with different levels of digital confidence and access, helping mitigate inequalities linked to socio-economic status.
Different Sectors (health and social care)	Neutral	The framework is applicable to staff across both health and social care. While differences exist in digital access between sectors, NES will continue to work with

		partners to address barriers and provide equitable access.
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## Next Steps

The Equality Impact Assessment has informed the following actions:

**Enhance Accessibility & Reach:** Ensure all communication and guidance clearly state that the framework is freely accessible without a Turas Learn account and is available in two accessible formats (mobile-friendly and downloadable document). Continue promoting the downloadable version for those with limited digital access.

**Inclusive Content Development:** Continue to apply accessibility standards and review content to ensure cultural sensitivity, inclusivity, and alignment with equality, diversity, and inclusion principles, including respectful use of language and pronouns.

**Tailored Engagement with Social Care Sector:** Continue to work with social care and social housing partners to support awareness and use across non-NHS settings, recognising workforce access challenges and varying digital confidence levels.

**Ongoing Stakeholder Collaboration:** Maintain engagement with SAPG, ARHAI Scotland, NSS AMR leads, and wider advisory partners to ensure the framework remains relevant, effective, and representative of diverse workforce needs across care sectors.

The evidence shows that there is no potential for unlawful discrimination, and we have built in actions to advance equality of opportunity and foster good relations.

## Monitoring and Evaluation

To ensure the continued relevance and effectiveness of the EQIA and associated actions, we will implement the following measures:

- **Evaluation of Framework Use and Accessibility:** Monitor use of the mobile-friendly and downloadable versions and track engagement through Turas Learn analytics (where available), alongside qualitative feedback.
- **Feedback Mechanisms:** Maintain active feedback forms on the AMR & Stewardship Turas Learn Zone and the framework to capture insights about accessibility, usability, and equity of access. The feedback form collects both comments on the framework itself and feedback on how it is being used in practice.



- **Stakeholder Feedback:** Continue collaboration with SAPG, GCU, ARHAI Scotland, social care partners and wider stakeholders across health and social care to inform updates and ensure equitable usefulness across all staff groups.
- **Alignment with Accessibility Standards:** Review content regularly, in line with NES quality assurance cycles, to ensure compliance with digital accessibility standards and make updates to support diverse user needs.
- **Evaluation cycle and governance:** Feedback will be reviewed after publication to identify any immediate actions necessary and fully reviewed after 12 months to inform updates to the framework. This process will be supported by an advisory group, which will also contribute to the review of this EQIA.

The EQIA will be reviewed:

- **Annually:** The next review will take place in December 2026 to assess progress against the identified actions and incorporate feedback or findings from evaluations.
- **Following major updates** to the framework or associated learning resources, if required earlier.

Sign-off

Director: Karen Wilson

Date: 03/12/25