Equality, Fairer Scotland and Children's Rights Impact Assessment

Healthcare Support Worker Commission EQIA

Introduction

NES directorate or department: Nursing, Midwifery and Allied Health Professions Directorate - Workforce Education and Career Development Programme.

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 relations
- 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.

The Equality Act 2010 identifies age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation as protected characteristics.

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. The EQIA is an important way to mainstream equality into our work at NES 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; and
- demonstrate how we have considered equality in making our decisions.

Purpose/objective of proposed work

In October 2021, the Chief Nursing Officer commissioned NHS Education for Scotland to undertake a review of career pathways for Healthcare Support Workers (HCSWs) working at levels 2-4 of the NHS Career Framework for Health. Phase 1 and 2 of the commission focused on HCSWs in nursing, midwifery and allied health roles. The overall aim of the commission was to recommend and develop a nationally agreed education and development framework to support the definition of Healthcare Support Worker (HCSW) roles, career progression and development through education and training, with a focus on how HCSWs support registered staff. Guidance for HCSWs, managers and education providers on using the framework and learning resources to enhance knowledge and skills have also been developed. Phase 3 focused on the development of a healthcare science support worker framework. Additional phases to the commission are now underway with a focus on specific allied health profession and healthcare science aspects.

Aim of the Commission

The NHS Education for Scotland (NES) Nursing, Midwifery and Allied Health Professions (NMAHP) Healthcare Support Worker (HCSW) Development and Education Framework is designed for all NMAHP HCSWs in NHS Scotland and builds on the strengths of the earlier HCSW Learning Framework:

https://www.nes.scot.nhs.uk/media/3pabxwnx/nesd1609-hcsw-development-education-framework-v7-april-2023.pdf

The Healthcare Science Support Worker Career Framework is designed for all healthcare science HCSWs in NHS Scotland:

https://www.hcstraining.nhs.scot/trainees/healthcare-science-support-worker-career-framework/

The Framework supports the development of core knowledge, skills, and behaviours in the four pillars of practice and enables profession specific and specialist knowledge, skills and behaviours to be added for all NMAHP HCSWs working at Levels 2–4. The Framework also reflects the education and career development pathways model set out in the Transforming Roles programme.

HCSWs work with and under the direction and supervision of healthcare practitioners. Their learning and development is essential to support the valuable contribution they make to the team in providing safe, effective and person-centred care.

The Framework aims to support HCSWs, managers and educators by:

- Helping to benchmark current level of practice against the Framework.
- Guide career development.
- Support discussions that take place as part of the personal development planning and review process, identifying areas for development.
- Inform succession planning.
- Support skills maximisation at every level of practice.
- Support service redesign and skill mix, identifying what is required for the patient journey and who can deliver this.
- Map professional development of new employees joining from another area / board / previous employment to prevent duplication.
- Plan and deliver education and training to meet the rapidly changing needs of HCSWs

The work is relevant to the following Equality 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.

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.

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 EQIA covers workstreams that are encompassed in the commission, including the education and development framework, recommendations from a review of relevant extant policy documents, education preparation for career level 4 HCSWs and articulation of education and career pathways.

The commission work has involved stakeholders at all stages through

- HCSW Commission Steering Group
- HCSW Education Sub-group
- Short-Life Working Groups convened for specific workstreams of the commission
- Working groups developing learning resources; for example, Promoting Effective Medicines Administration Practice.

Representation for all groups has included HCSWs across a range of roles and levels of practice, managers and NHS Board service leads, educators from Boards, higher education and college sectors, social care partners, trade unions, professional and regulatory bodies

Evidence

The draft EQIA was developed by the NES HCSW commission team and shared with the HCSW Commission Steering group for discussion and comment. It is expected that further assessment will follow as additional workstreams are added to the commission. Consultation with stakeholders has been integral to the development, maintenance, and evolution of the Commission related outputs. This has allowed us to enlarge our representation and hear the perspectives of a more diverse range of staff from the NHS Scotland workforce, which is the target audience for the Commission work. The consultation resulted in a report from phase 1 of the commission.

A key ambition of the Framework is to facilitate an effective and fair progression for the HCSW workforce. The makeup and characteristics of the workforce are especially relevant in addition to more general considerations of the Commission. As completion of equality and diversity information is optional we do not have an accurate picture of whether the workforce is representative of all protected characteristics.

Where available, we have used Scottish Health Workforce equality and diversity data to help us understand the demographic of the staff for whom the Commission is relevant and consider how to address potential inequalities of access, participation, or attainment.

Profession	Practitioners' headcount*	HCSWs' headcount*
Nursing and Midwifery	77,407	22,754
Allied Health Professions	16,271	2,765
Healthcare Science	7,481	2,864

*Data as of 31 March 2024

Workforce data for healthcare science is inconsistent and known to be incorrect owing to its disparate nature.

A HCSW learning survey was carried out in 2018 and was used to inform the current HCSW Commission. The learning survey has been repeated, closing in September 2024. The data are still being analysed. This latest survey included HCSWs, managers and educators. The 2018 survey showed significant variation for HCSWs in terms of getting information about learning, and although 61% of HCSWs reported having a current Personal Development Plan discussion, the variation across health boards ranged from 35% to 78%.

A healthcare science impact survey closed on 25 January 2025 that gathered information on the healthcare science Support Worker Framework.

NES commissioned a review of the Associate Practice Educator role, which had been introduced in two NHS Health Boards (NHS Tayside and NHS Grampian). The research seeks to understand best practice related to the role and how it can overcome challenges around access to learning and development at work for HCSWs.

https://www.nes.scot.nhs.uk/media/exudkgok/hcsws-as-educators-scoping-study-final-report-with-executive-summary.pdf

No gaps identified.

Summary

We have considered how this work will impact on the Public Sector Equality Duty (See Annex A). 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 will adhere to the NES Inclusive Education and Learning Policy in the refresh, design and delivery of the HCSW Commission outputs. This will include:

1. Being proactive in our communication and actions, to create psychological safety for all stakeholders, ensuring reasonable adjustments can be put in place and barriers to participation reduced or eliminated.

2. Keeping up to date with contemporary evidence and lived experiences, potential barriers to any resources developed as part of the Commission, utilising best practice to help create inclusive resources which avoid direct or indirect discrimination.

3. Regular impact review of our materials and resources to ensure they are and continue to be underpinned by the principles of equality, diversity, and inclusion.

4. Incorporating material into the resources that raises awareness about the importance of challenging behaviours which may discriminate, victimise, or result in harassment.

5. Assessing how it can promote good relations between people who share a protected characteristic and those who do not. For example, how we can tackle any prejudice or stigma.

Potential Impact

Through discussion with stakeholders, we have identified current and future actions to mitigate against any potential disparities in outcomes for people with protected characteristics and from diverse populations.

We have also considered children's rights, our role as a corporate parent and the Fairer Scotland Duty. This work is not applicable to children's rights.

The impact assessment has led us to conclude currently that there is no potential for unlawful discrimination, and we have built in actions to advance equality of opportunity and foster good relations.

See Appendix A

Making a difference

The impact assessment has informed the following:

Issue or Risk identified	Proposed changes/action	Timescale
Evidence suggests lower digital skills in higher age groups https://ec.europa.eu/eurostat/web/products-eurostat-news/w/ddn-20240222-1	Resources are designed and delivered to be inclusive, in formats that suit – not just digital but printed copies available if required Promotional resources to include QR codes for easy scanning on mobile for those not able to readily access desk top PCs/laptops Promotional resources to include QR codes for easy scanning on mobile for those not able to readily access desk top PCs/laptops Availability of recorded resources so can be accessed at a time that suits with captions and transcripts available – can be used and incorporated into local training being delivered Ensure digital resources, including PowerPoint presentations adhere to the Web Content Accessibility Guidelines (WCAG) Standards 2.2 AA. Develop learning resources in easy-to-read and alternative formats.	

Raising awareness of the Commission outputs Communication channels – can be challenging via cascade.	Using all available mediums Supporting "word of mouth" Support participation and access to the Commission outputs for people who may currently face barriers to accessing learning and professional development.	
Stakeholder groups not representative of all stakeholders	Canvassing for new members to be represented in groups Meetings via Teams to encourage participation Minutes of meetings to be available	Monitor EQIA on a regular basis for any changes

Monitoring

The impact assessment will be reviewed to understand the actual impacts of the work.

- Workplan – regularly reviewed (Steering Group) and updated reviewed as and when the work progresses
- Resources include built in feedback forms
- Actively seek feedback through Practice Education infrastructure in boards and through HCSW groups/networks, e.g., HCSW Advisory Group, HCSW Education Network, Associate Practice Educator Network, HCSW Commission Steering Group
- Analysing data from the 2024/25 HCSW national learning survey
- National HCSW workforce data sets

Sign-Off

Director: Karen Wilson

Date: 02 April 2025

Appendix A: 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 Supporting access for all HCSWs will help to empower them to take a lead in their own learning and career development. 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 incorporated.	Yes Raising awareness of knowledge, skills and behaviours expected when supporting colleagues or users of services. The HCSW Framework is based on NHS Scotland values.

Disabled people	No	No	Yes We have considered how outputs from the commission work are accessible for disabled people – sensory impairments, neuro diverse, mental health, physical health. Ensure minimal barriers to accessing resources through ensuring processes, materials and supporting resources meet all accessibility requirements and provide alternatives where necessary.	Yes Incorporate images, case studies and examples of people with different protected characteristics and from diverse population groups. Embed information that enables users to develop knowledge, skills and behaviours that support the diversity of needs in colleagues and the people who use services. The HCSW Framework is based on NHS Scotland values.
Trans and non-binary people	No	No		The HCSW Framework is based on NHS Scotland values.
People who are pregnant or on maternity leave	No	No		The HCSW Framework is based on NHS Scotland values.
People from different ethnic backgrounds	No	No	Yes Resource content to support use of the portfolios is representative of the	The HCSW Framework is based on NHS Scotland values.

			general population and has examples which reflects the race spectrum.	
People with religious or protected beliefs	No	No	Yes Resource content to support use of the portfolios is representative of the general population and has examples which reflects the spectrum of religions and beliefs	The HCSW Framework is based on NHS Scotland values.
Men and women [This may include carers, because many are women.]	No	No		The HCSW Framework is based on NHS Scotland values.
People who are heterosexual, lesbian, gay or bisexual	No	No		The HCSW Framework is based on NHS Scotland values.
People who are married or in a civil partnership [only in employment situations]	No	No		The HCSW Framework is based on NHS Scotland values.
Care experienced people	NOTE - there is no legal protection from discrimination on basis of care experience.	No		The HCSW Framework is based on NHS Scotland values.

People living in remote, rural and island communities	NOTE - there is no legal protection from discrimination on basis of living in a remote, rural or island community.	No		The HCSW Framework is based on NHS Scotland values.
People experiencing health 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 are ex-offenders, people with addictions and people involved with prostitution. Note – links between socio-economic factors and education.]	NOTE - there is no legal protection from discrimination on basis of socio-economic disadvantage.	No		The HCSW Framework 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 – socio-economic factors and the links to education and opportunities for employment.]	NOTE - there is no legal protection from discrimination in employment on basis of socio-economic disadvantage.	No		The HCSW Framework is based on NHS Scotland values.

Carers	NOTE - there is no legal protection from discrimination on basis of caring responsibilities. Women continue to have the majority of caring responsibilities and can be put at a particular disadvantage in connection with this. This may be unlawful indirect sex discrimination.	No		The HCSW Framework is based on NHS Scotland values.

Appendix B: Impact on UNCRC rights

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'. You can access this summary of the UNCRC articles for more information [UNCRC_summary-1_1.pdf (unicef.org.uk)](#)

You can find out more about children's rights at [Childrens Rights (UNCRC) | Turas | Learn (nhs.scot)](#)

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		