

# Equality Impact Assessment Report Template

Title: [Review and Update of Infection Prevention and Control Digital Learning Resources](#)

NES directorate or department: NMAHP

Date Report Completed: January 2025

Reviewed: 25 February 2026

## Introduction

Equality Impact Assessment (EQIA) is a process that helps us to consider how our work will meet the 3 parts of the Public Sector Equality Duty. It 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
- Demonstrate how we have considered equality in making our decisions

## Background

The NHS Education for Scotland (NES) Infection Prevention and Control (IPC) Education Team aim is to provide national education in IPC through accessible, high-quality learning resources that enhance IPC knowledge and practice among health and social care staff, students, and volunteers across Scotland.

The programme aims to support the reduction of Healthcare Associated Infections (HCAIs), combat antimicrobial resistance, and mitigate risks associated with the Healthcare Built Environment (HBE).

Aligned with the [National IPC Manual](#) and the [Care Home IPC Manual](#), our initiatives support the strategic objectives of the [NES Strategy 2023-26](#) and the [NES Learning and Education Strategy 2023-2026](#), which emphasise high-quality education, inclusivity, and innovation.

Our digital learning resources are hosted on the Turas Learn platform within two specific zones:

[IPC Zone](#)

[Antimicrobial Resistance and Stewardship Zone](#)

e-learning modules only are also hosted on the LearnPro NHS platform to improve accessibility for staff from NHS boards which use this learning platform.

Our primary aim is to provide accessible, high-quality learning resources that enhance IPC knowledge and practices among health and social care workers, students and volunteers. The expected outcome is to build a skilled, competent, and resilient workforce capable of improving health and care outcomes by reducing HCAIs and addressing antimicrobial resistance.

Activities align with several key strategies, including:

- [Healthcare Associated Infection \(HCAI\) Strategy 2023-2025](#)
- [UK's Five-Year National Action Plan to Combat Antimicrobial Resistance 2024-2029](#)
- [Infection Prevention Workforce Strategic Plan 2022-2024](#)

- [National Learning and Development Strategy for the Specialist Healthcare Built Environment Workforce \(2021-2026\)](#)

This EQIA includes transitioning IPC e-learning resources to an accessible authoring tool (Articulate Rise) and conducting a comprehensive review to ensure accessibility, alignment with national standards, and relevance to diverse users. This transition includes updating and enhancing a variety of resource formats (documents, presentations, PDFs, videos, animations, e-learning modules), making them easier to find and access while supporting the diverse needs of health and social care staff, students, and volunteers across Scotland.

This process involves collaboration with various key stakeholders, including Antimicrobial Resistance & Healthcare Associated Infection (ARHAI) Scotland, as subject matter experts, and strategic partners such as the Scottish Antimicrobial Prescribing Group (SAPG) and NHS Scotland Assure to ensure the resources are up-to-date, evidence-based, and accessible to all learners.

## Equality Outcomes

This EQIA aligns with [NES Equality and Diversity Outcomes](#) 1 and 7:

- **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 IPC and HBE resources provide comprehensive education in IPC, equipping health and social care staff, students, and volunteers with up-to-date, evidence-based knowledge and practices. This education is crucial in health and social care settings serving underserved and vulnerable populations, reducing health disparities by improving care consistency and effectiveness across all environments.
- **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 transition to a new authoring tool (Articulate Rise) enhances accessibility and flexibility, allowing resources to be accessed on any device and ensuring compliance with accessibility standards. This inclusivity supports a diverse range of learners, including those with disabilities, and broadens access to educational opportunities across health and social care settings.

### Potential for Reducing Inequalities:

The review and update of IPC and HBE digital educational resources has the potential to reduce inequalities and improve outcomes by:

- **Enhancing Accessibility:** Ensuring digital educational materials are accessible to individuals with disabilities, meeting legal requirements.
- **Addressing Diverse Learning Needs:** Offering content in multiple formats to cater to different learning needs.
- **Broadening Participation:** Encouraging engagement from underrepresented groups within the health and social care sectors, improving inclusivity and equity in educational opportunities.
- **Improving Health Outcomes:** Providing up-to-date, evidence-based education that enables all health and social care workers to effectively prevent and control infections, leading to better health outcomes for all.

## Evidence

To inform our EQIA, we have considered data from the following sources:

1. **Stakeholder Engagement:** Regular engagement with key stakeholders, including ARHAI Scotland, the Scottish Antimicrobial Prescribing Group (SAPG), and NHS Scotland Assure, provided essential insights to align our resources with best practices and meet the needs of diverse health and social care settings.
2. **Interactive JamBoard Session:** An interactive JamBoard session was conducted with the Workforce Education Development Advisory Group for IPC (IPC WEDAG), a multi-disciplinary group of stakeholders from health, social care, and higher education. The session offered valuable feedback on resource design, accessibility, and usability, directly informing the development and enhancement of our learning resources.
3. **User Evaluation Feedback:** Feedback from health and social care staff, students, and volunteers who engaged with our e-learning resources on Turas Learn provided insights into accessibility challenges and the overall effectiveness of the content.
4. **Statistical Reporting:** Data on the uptake of our e-learning resources, including engagement levels across different professional groups and organisations, was reviewed to identify trends and areas for improvement.
5. **Workforce Data Analysis (updated February 2026):**
  - [iMatter Health & Social Care Staff Experience Survey \(2025\)](#) This report provided valuable data from the iMatter survey, including demographics related to disability, gender, and ethnicity. It highlighted the diversity of the NHS Scotland workforce and informed the development of accessible and inclusive IPC resources.
  - [NHS Scotland Workforce Data \(02 December 2025\)](#): This report included key demographics, such as gender distribution and median age, ensuring that IPC resources are relevant to a diverse workforce.
  - [Scottish Social Service Sector: Report on 2024 Workforce Data](#): This report provided additional workforce data on the social care sector, including gender distribution and age demographics, ensuring that our IPC resources are inclusive and relevant for social care staff.
  - [Coronavirus \(COVID-19\): care home outbreaks - root cause analysis](#): Insights from this review highlighted challenges in IPC education, particularly related to digital infrastructure in care homes. These findings informed necessary enhancements to our educational resources, ensuring they are accessible and adaptable for care settings with limited digital capabilities.
6. **Internal Working Group Discussions:** A dedicated working group meets regularly to review evidence, discuss findings, and ensure that the EQIA process fully considered all relevant evidence.

## 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 IPC 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	Our digital learning resources are designed to be accessible to all ages, with features such as self-paced learning, which is suitable for individuals who may have different work-life responsibilities.
Disability (physical, sensory, learning disabilities, neurodiversity, communication needs, mental health)	Positive	The transition to the Articulate Rise authoring tool improves accessibility with features such as screen reader compatibility and adjustable text sizes. We will work to ensure resources comply with accessibility standards to cater to all learners, including those with disabilities, for example, by including descriptions in our video transcripts. Alternative formats will be provided on request, e.g. for those without access to digital resources, supporting inclusive access for learners with a range of disabilities.
Gender Reassignment	Neutral	No differential impact is anticipated. The IPC resources are designed to be inclusive and respectful of all gender identities. Language and content will be periodically reviewed to ensure inclusivity.
Race / Ethnicity	Neutral	We ensure the language and content used in the e-learning resources is culturally sensitive and reflective of Scotland's diverse population. No specific differential impact is anticipated, but we are committed to promoting inclusivity and anti-racism throughout our content. We include representation from Scotland's diverse workforce in our resources, including animations and user guides.

Religion / Belief (including none)	Neutral	No differential impact is anticipated. Our content will be respectful and inclusive of all religious beliefs. We include representations of different religions in our diverse NHS workforce in our resources, including animations and user guides.
Sex	Neutral	No differential impact is anticipated. Our resources are designed to be inclusive for all genders. We include the use of all pronouns in our learning resources, including animations and User Guides.
Sexual Orientation	Neutral	No differential impact is anticipated for this protected characteristic.
Marriage / Civil Partnership	Neutral	No differential impact is anticipated for this protected characteristic.
Pregnancy and Maternity	Neutral	Our self-paced e-learning model offers flexibility, making it accessible to those on maternity leave or with caregiving responsibilities. No differential impact is anticipated.
Socio-economic Status	Neutral	The transition of our e-learning modules to the Articulate Rise authoring tool enhances compatibility across devices, including mobile platforms. For staff with limited access to technology or internet connectivity, we will mitigate these challenges by offering alternative formats on request where possible and advocating for improved on-site digital access.
Different Sectors (health and social care)	Positive	<p>Our e-learning resources are accessible to staff across both health and social care sectors and are designed for use via web-based platforms and mobile applications. This includes compatibility with smartphones and digital tablets, supporting flexible access to learning regardless of sector or work setting. We recognise that access to platforms such as Turas Learn is not consistent across sectors, and alternative access solutions are being developed and used where required.</p> <p>The e-learning is designed to be mobile and tablet friendly, reducing reliance on fixed desktop computers. This is particularly important for staff groups within health and social care, such as nurses, support workers, and ambulance staff, who are more likely to report barriers to accessing computers during working hours. Mobile and tablet compatible learning supports more equitable access by enabling learning to take place at times and locations that align with shift-based and operational roles.</p>

## Next Steps

The Equality Impact Assessment has informed the following actions:

- **Enhancing Accessibility:** Ensure all digital learning resources meet best practice accessibility standards, including compatibility with assistive technologies and the availability of alternative formats as required.
- **Inclusive Content Development:** Regularly review and update content to ensure it reflects cultural sensitivity, inclusivity, and alignment with equality and diversity principles.
- **Ongoing Stakeholder Engagement:** Maintain engagement with key stakeholders, such as ARHAI Scotland, SAPG, and IPC WEDAG, to ensure resources remain relevant, effective, and responsive to diverse user needs.

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. We will monitor the number of requests for learning materials in alternative formats.

## Actions (updated February 2026)

Action	February 2026 update
Added transcripts and captions to all videos and animations	Completed
Transfer all e-learning modules from Articulate storyline to Articulate rise to enhance accessibility	Continuing

## Monitoring and Evaluation

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

- **Evaluation of Resource Uptake and Accessibility:** Track user engagement with IPC resources across Turas Learn and other platforms, focusing on completion rates, user satisfaction, and feedback.
- **Stakeholder Feedback:** Continue collaboration with stakeholders, including ARHAI Scotland, SAPG, NHS Scotland Assure, and IPC WEDAG, to assess the resources' effectiveness and address emerging needs.
- **Regular Review of Accessibility Standards:** In line with NES quality assurance processes review resources to ensure they comply with the Equality Act 2010 and meet current accessibility standards, making updates as required to maintain inclusivity.
- **Feedback Mechanisms:** Maintain active feedback forms and evaluation tools on resource platforms to capture learner experiences and inform iterative improvements.

The EQIA will be reviewed:

- **Annually:** Following the review completed on **25 February 2026**, the next scheduled annual review will take place in **January 2027**. This review will assess progress against the identified actions, consider updated evidence, and incorporate feedback or findings from ongoing evaluation activity.
- **Following Major Updates:** If significant changes are made to the learning resources or platforms before the next scheduled review, the EQIA will be revisited to address any new impacts.

## Sign-off

Director: Karen Wilson

Date: 05 March 2025

Review completed (1): 25 February 2026

Review (2): February 2027

## 2026 EQIA Review Statement

This Equality Impact Assessment was formally reviewed on **25 February 2026** as part of the ongoing review and update of Infection Prevention and Control digital learning resources.

The review considered:

- Progress against the actions identified in the previous EQIA
- The new antimicrobial resistance and stewardship zone
- Accessibility improvements implemented since the last sign-off
- The ongoing transition of e-learning resources to Articulate Rise
- Updated workforce and stakeholder evidence available up to February 2026

The review confirmed that the original assessment remains valid and that a positive impact has been identified for different sectors, specifically health and social care. The actions taken to date continue to advance equality of opportunity and improve access to learning for a diverse health and social care workforce.

Where actions are ongoing, these have been clearly recorded, and progress will continue to be monitored through routine quality assurance, stakeholder engagement, and learner feedback.

This EQIA will continue to be reviewed annually or earlier if significant changes are made to the learning resources, delivery platforms, or target audience.