

Equality, Fairer Scotland and Children's Rights Impact Assessment

Healthcare Support Worker Commission EQIA

NMAHP Directorate, Workforce Education and Career Development Team

Date Report Completed: March 2025

Date Report Reviewed: April 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 Healthcare Support Worker 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

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. Phases 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 has 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 professions 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:

[nesd1609-hcsw-development-education-framework-v7-april-2023.pdf](#)

The Healthcare Science Support Worker Career Framework is designed for all healthcare science (HCS) workers in NHS Scotland:

[Healthcare Science Support Worker Level 2-4 Framework | Heal](#)

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 are 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 the 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 across all groups has included HCSWs from a range of roles and levels, such as:

- Clinical managers
- NHS Board service leads
- Board educators
- Higher education and college sectors,
- Social care partners,
- Trade union representatives
- Professional and regulatory bodies

Evidence

This EQIA was collaboratively developed by the NES HCSW Commission team and shared with the HCSW Commission Steering Group for detailed discussion and feedback, embedding equality considerations from the outset. As additional workstreams are commissioned, we have established ongoing collaboration with the commissioning team to keep the EQIA dynamic, responsive, and comprehensive, ensuring it evolves alongside the Framework's implementation.

Central to the Healthcare Science Support Worker Career Framework is the ambition to deliver effective, equitable progression opportunities across the entire HCSW workforce. This requires deep insight into workforce demographics and characteristics, extending beyond the general Commission aims. We have therefore drawn on the latest available Scottish Health workforce equality and diversity data to profile and support the development of the Health Care Support Worker Framework

*Data as of 31 March 2024 (latest available via NES Turas; no updated HCSW breakdowns published as of April 2026).

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

Together, with rigorous consultative processes and up-to-date empirical workforce data, form a strong evidence foundation for the EQIA, directly meeting its core requirements for systematic, evidence-led analysis.

Assessment

Characteristic	Potential Impact	Rationale
Age	Minimal Impact	Digital literacy, we know, is an issue across the workforce. Alternative formats are available, for example, print, QR codes) recorded content with transcripts.
Disability	Minimal 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 Team	Ongoing	Print materials budget; transcription software
Communication channels challenging via cascade	Multi-channel promotion (board comms, HCSW networks, newsletters, Teams meetings, practice education teams)	Steering Group	Ongoing	Digital platforms access; meeting facilitation
Stale workforce equality data	Turas's data audits; integrate 2025/26 HCSW Learning Survey findings	Data/Analytics Lead	Annually	Turas Platform access; analyst time

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 on the adult HCSW workforce.

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 HCSW 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 HCSW advisory groups and educator networks, fostering shared insights and localised implementation support. Additionally, analysis of national HCSW 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: 02 April 2025

Review (1) completed: 29 April 2026

Review (2): April 2027

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
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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	<p>Yes - Supporting access for all HCSWs will help to empower them to take a lead in their own learning and career development.</p> <p>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.</p>	<p>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.</p>

Disabled people	No	No	<p>Yes - We have considered how outputs from the commission work are accessible for disabled people – sensory impairments, neurodiverse, mental health, and physical health.</p> <p>Ensure minimal barriers to accessing resources through ensuring processes, materials and supporting resources meet all accessibility requirements and provide alternatives where necessary.</p>	<p>Yes - Incorporate images, case studies and examples of people with different protected characteristics and from diverse population groups.</p> <p>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.</p> <p>The HCSW Framework is based on NHS Scotland values.</p>
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 the use of the portfolios is representative of the general population and has examples which reflects the race spectrum.	The HCSW Framework is based on NHS Scotland values.
People with religious or protected beliefs	No	No	Yes - Resource content to support the use of the portfolios is representative of the general population and has examples that reflect 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	No	No		The HCSW Framework 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 HCSW Framework is based on NHS Scotland values.

<p>People living in remote, rural and island communities</p>	<p>NOTE - there is no legal protection from discrimination on the basis of living in a remote, rural or island community.</p>	<p>No</p>		<p>The HCSW Framework is based on NHS Scotland values.</p>
<p>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.</p>	<p>NOTE - there is no legal protection from discrimination in employment on the basis of socioeconomic disadvantage.</p>	<p>No</p>		<p>The HCSW Framework is based on NHS Scotland values.</p>

Appendix 3: 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’.

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		