



Our Equality, Diversity and Inclusion (EDI) Plan

The Nursing and Midwifery Council
EDI objectives, priorities and actions
2022—2025

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A foreword from our Chief Executive



Everyone deserves safe, effective, and kind nursing and midwifery care, and every professional on our register, and colleague working with us, should be able to do their important work free from bias and discrimination.

To make this vision a reality we will need to be open about the devastating impact of discrimination, and how its presence in structures and individual actions across the health and social care sector and beyond inhibits professionals from providing the kind of effective, person-centred care that everyone has a right to expect and receive.

Unpicking the issues which have led to systemic inequalities requires focus, commitment and a sustained approach, which is why we have developed a three year plan driven by our data and evidence from those we regulate, employ and support. We will continue to listen to our professionals, colleagues, customers and partners and use our position to advocate for equality and inclusion for all groups.

We rightly set high standards for the professionals we regulate, and we're

clear that to remain on our register they must practise in a way which is person-centred, respectful, recognises diversity and upholds human rights. Our **Code** sets out our expectations that professionals should act as advocates, challenge discriminatory attitudes and behaviours, consider cultural sensitivities and treat people fairly. Our EDI plan sets out the ways we are holding ourselves accountable for achieving the same aspirations.

Regulation without a robust approach to upholding equality and tackling discrimination can never be truly effective for everyone, which is why you have our commitment that this is an utmost priority for me and everyone at the NMC.

We've made progress on our EDI work, but we still have a long way to go until it's embedded within the NMC. We're clear about our responsibility to promote equality, diversity and inclusion in everything we do as a regulator and as an employer. We're ambitious about what we can achieve to promote best practice in equality, working with our partners and the wider sector.

Andrea Sutcliffe
Chief Executive and Registrar

Introduction

Tackling discrimination and inequality, celebrating diversity and promoting inclusion, including making sure that our processes are fair for our registered professionals and colleagues, is a priority in our 2022–2025 corporate plan.

The EDI plan includes actions aimed at better meeting the needs of nursing and midwifery professionals and students through our regulatory processes, and specific actions on improvements to our internal processes for our colleagues. The plan mostly keeps these actions separate, but it also contains joint actions to reflect that progress in one area can't be achieved without the other.

Our plan sets out how we'll scrutinise our processes and decision-making for both nursing and midwifery professionals and those we employ, as well as the work we'll do with partners, especially where our position as the sole regulator of the UK's nursing and midwifery professionals provides us with unique insight into issues which need to be tackled together.

It will put us in a much stronger position to attract, retain and develop a diverse workforce while also supporting our professions and the public. We'll also be better placed to respond to external challenges, such as the impact of the Covid-19 pandemic, and sector developments, including the recent inquiries on the poorer experiences of women and people from ethnic minority backgrounds using maternity services.

This document explores how we'll approach this work, how we'll measure our impact, and when people can expect to hear about our progress.

The work we're planning to do over the next three years will enable us to explore the different ways discrimination manifests. We'll support our people to consider how issues can occur on an interpersonal level. We'll analyse the impact of our organisational policies and processes – acting on evidence that there are unjustifiable disparities. And, we'll work with partners where we can make inroads together on dismantling structural barriers and systemic inequalities.

To make this a reality we'll take a phased, planned approach to the improvements we want to make. We'll need to start with implementing a more sophisticated approach to the way we collect and use our diversity data, building a solid foundation of evidence from which we can clearly identify equality issues and work with partners to design effective solutions.

To implement our evidence-led EDI interventions, we'll need colleagues at all levels of the NMC who are confident and competent on EDI issues. Colleagues will see this work as an enabler for all our strategic and corporate priorities, and our leaders will play a significant role in ensuring we hold ourselves and others accountable for our progress. We want to harness people's enthusiasm for making a difference and ensure this translates into tangible action.

We'll need everyone to contribute to a culture where we learn from mistakes without being defensive, consistently scrutinise decisions for evidence of unfairness, and take active steps to address disparities in outcomes where there is evidence certain groups face disadvantages. We'll need to be clear about the barriers facing professionals, our colleagues and people accessing health and care services, and work with partners across the sector to tackle these issues together.



This work will require cultural change and dedication, but it will also need clear structures in place to embed these new ways of working. To help achieve this, we'll strengthen our approach to the governance of our EDI work, and we'll review the policies, processes and rules which guide the way we operate, in particular through our regulatory reform programme. This will ensure equality is embedded into the fabric of the organisation as we explore how we can be the best regulator for our current and our future registered nursing and midwifery professionals.

Our strategic landscape

We believe in being person-centred – it's the way we expect our professionals to deliver care, and how we want to act as a regulator and employer.

Our EDI plan will ensure we are closer to achieving this consistently by being better able to understand and meet people's needs. This work underpins all our activity within the three core pillars of our strategy: regulate, support and influence. It enables us to champion our values by being fair, kind, collaborative and ambitious.



Equality is the thread running through all six of our strategic themes:

1

Improvement and innovation

We will need to stay open-minded and consider new ways of working if we want to break cycles of inequality and see different outcomes and experiences for people. We'll measure the impact of any changes we make to ensure everyone benefits.

2

Proactive support for our professions

We will need to be adaptable in responding to the needs of the professionals on the register and those they care for, and be ready to remove unnecessary barriers in our processes – especially in light of global events which may deepen existing inequalities.

3

Visible and better informed

We will ensure we're evidence led, using internal and external EDI insight so that we are in a strong position to make effective decisions, improve our own processes and advocate for people experiencing disparities when we work with partners.

4

Engaging and empowering

We will monitor and increase the diversity of the people we engage with who help shape our regulatory work, and we will strengthen people's understanding of our role as a regulator, as well as how equality underpins the care they can expect to receive via our Code and professional Standards.

5

Insight and influence

We will improve our approach to collecting, analysing and reporting on our diversity data for professionals and colleagues, and we will work with partners to influence fairer and more inclusive ways of working collaboratively across the health and care sector.

6

Fit for the future workplace

We will improve our recruitment and people management processes so that everyone we employ can thrive without barriers.

How we developed these actions

The priorities and actions set out in this plan have been shaped by:

- our legal responsibilities
- our data and evidence
- information from our professionals, partners and NMC colleagues
- wider issues across the health and care sector.

Our legal responsibilities

The Equality Act 2010, including the Public Sector Equality Duty, contains measures which have a direct impact on our functions. Our approach to EDI is underpinned by these legal duties in all our work as a regulator and employer. This includes thoroughly considering how best we can eliminate discrimination, advance equality of opportunity and foster good relations between different groups in everything that we do.

In order to give proper consideration to our Public Sector Equality Duty we take steps to understand the potential and actual impact our policies and practices are having on people from the groups protected by the Equality Act 2010. We continuously collect and analyse evidence from a range of sources to make sure we have adequate and accurate information to shape our actions.



Our plan is intersectional, which means that we have considered people's experiences of overlapping and interconnected inequalities and discrimination and how these interact to shape people's lived experience, rather than only looking at each of the protected characteristics separately. This helps us better identify, understand and address the inequalities experienced by our colleagues, our professionals and the public.

Where we have identified a specific issue experienced by a particular protected group, we have committed to activities to address it, for example, where we see particular career progression issues being experienced by colleagues who are Black, Asian or from another ethnic minority background. However, the majority of our actions have been designed to facilitate wider change for a range of groups within the work that we do and the ways that we operate.

As a four country regulator, we are also mindful of the need to be compliant with the relevant equalities legislation in Northern Ireland where this applies to us. We actively consider our Northern Irish equality duties alongside our Public Sector Equality Duty.

Our EDI plan also helps us to consider how we meet our responsibilities under the Human Rights Act 1998, which protects people's human rights and enshrines the articles of the European Convention on Human Rights in UK law. It's particularly important that as a public body we regulate in a way which is compatible with people's fundamental rights — examples of relevant articles the Plan is designed to uphold include:

- Article 6 – the right to a fair trial in how we run our fitness to practise processes
- Article 8 – the right to respect for private and family life
- Article 14 – freedom from discrimination in how people observe these rights.

Our data and evidence

Our regulatory data

We publish **EDI data tables** annually, in order to keep the public and our stakeholders informed about the diversity of the professionals on our register, and of our Council and our fitness to practise committees.

The information about professionals on our register from our EDI data tables for 2021–2022 includes:

Of those professionals on our register



89.1% are **women**
- similar to previous years



10% are **Black**
- compared to 9% last year



12.5% are **Asian**
- compared to 10.3% last year



3.2% told us they **have a disability** - compared to 3.6% last year



0.8% told us their **gender doesn't match** their sex at birth - compared to 0.7% last year



57.7% told us they're **Christian** - similar to previous years



30.3% told us they **have no religion** - compared to 28.9% last year

We know that some professionals on our register receive different outcomes from our processes based on who they are. We have undertaken a long-term, two part research programme, Ambitious for Change, to help us to understand this better.

Our **phase one** research, published in 2020, examined the impact of our regulatory processes on professionals with different diversity characteristics. It found that sometimes people receive different outcomes from our education, overseas registration, revalidation and fitness to practise processes based on who they are.

We found that male or disabled professionals were more likely to receive disproportionate outcomes from all of the processes we looked at. Other groups, such as Black, older and bisexual professionals were found to have worse outcomes in some but not all of our processes. For example, people in these groups were less likely to register successfully through our overseas registration process but while older groups were also less likely to revalidate successfully, Black or bisexual professionals were more likely to be referred to us and progress through the stages of our fitness to practise process.

In our **phase two** research — published in 2022 — when we compared our fitness to practise referral rates with workforce diversity data, we found concerning results. For example, some employers refer more men and Black professionals to fitness to practise compared to the make-up of our register and their own workforce.

Most of the professionals we spoke to told us that they felt one or more of their diversity characteristics played a part in their referral from their employer and said an ‘insider/outsider’ culture left them feeling unsupported.

We also found that the work setting and the type of work someone does can influence a person’s experience of revalidation or fitness to practise. Those working in care homes, GP practices or providers which employ a lot of bank and agency staff are particularly affected. We know that certain groups, such as Black professionals, are over-represented in these settings. This indicates longstanding, systemic inequalities across health and social care that perpetuate the disparities we’re seeing.

Our workforce data

We have more than 1,200 colleagues who work in a wide range of roles across the NMC. We collect diversity data to understand the demographic makeup of our workforce and to ensure we identify any trends or barriers that may be faced by different groups of employees. This helps us to create targeted interventions that will have the biggest impact.

In 2022, our workforce data showed that:

Of our colleagues



68%
are **women**



5.5%
are **lesbian, gay or bi**



37%
have a **Black** or **ethnic minority** ethnicity



49.2%
have a religion,
with the majority of those identifying as Christian



8%
told us they **have a disability**



53.2%
are **aged under 39**

We know we have gaps in our data. For example we don't know the ethnicity of 19 percent of our workforce, and 20 percent of colleagues have not told us whether they have a disability or not. We know we have work to do to improve people's trust and confidence to share their diversity data with us, so that we can fully meet their needs and understand any barriers they may face.

In 2022 we **reported our pay gaps**, across ethnicity, disability and gender. We have a mean ethnicity pay gap of 27.1 percent, a mean gender pay gap of 6.7 percent and an inverse disability pay gap of -4 percent. We know that we have an underrepresentation of Black and ethnic minority colleagues in our senior leadership roles and that women and Black colleagues are overrepresented in our junior roles which is driving our pay gaps.

Our EDI plan aims to tackle the causes of our pay gaps and increase the representation of women and Black and ethnic minority colleagues across all grades in the organisation.

We collect regular feedback from our colleagues, through our internal 'Your Voice' survey and participation in external benchmarking surveys such as the NHS Workforce Race Equality Standard. We disaggregate this by diversity data to help us understand how to target our EDI initiatives to have the most impact.



Information from our professionals, partners and NMC colleagues

Our work with stakeholders has informed and helped shape our plan. This includes engagement with other regulators, data sharing with partners and work with employers carried out by our Employer Link Service.

We have also engaged with colleagues across the NMC around the direction and future delivery of our EDI plan. Our Executive Board endorsed our plan in April 2022 and our Council formally approved the plan in May 2022.

Wider issues across the health and care sector

We know that we can't carry out our actions in isolation and expect to see widescale change without reflecting and responding to developments, challenges and inequalities which exist across the health and social care sector.

Recent reports have shone a light on the disparities facing people using care, as well as those providing it, and we are still learning about the ongoing and long-term public health issues from the Covid-19 pandemic and the climate crisis.

In order to be an effective and proactive regulator and employer our EDI plan includes commitments to support us in monitoring and contributing to these existing and emerging issues, adapting our work to ensure avoidable inequalities can be minimised.

Our EDI objectives, priorities and actions

Overarching objectives

In September 2021 our Council agreed four overarching EDI objectives. These are:

A

Reflect our values as a regulator that prioritises the needs and wellbeing of the nursing and midwifery professions and the public.

B

Make sure we show good equality practice as an employer.

C

Use EDI data in a strategic and coordinated way, both internally and with partners across the health and care sector.

D

Tackle health inequalities by using our platform to advocate for better care for everyone accessing services.



Our 10 priority EDI themes for 2022–2025

In order to deliver the aims set out in our strategy, corporate plan and our overarching EDI objectives, we have developed clear plans which we and our stakeholders can follow and track our progress against.

Our Executive team and Council have now agreed the steps we need to take to make sustainable progress over the next three years. Below we have set out ten priority themes for our EDI work, and shared examples of what this will look like in practice.

Over the next three years we will:

1

Take a more sophisticated approach to collecting and using EDI data

- Address diversity data gaps for employees.
- Review all categories in our diversity data monitoring guidance, and undertake work to consider the inclusion of socioeconomic status data monitoring.
- Collect and report on our insight into EDI issues across all four UK countries.
- Make our evidence and data more accessible.

2

Learn from EDI evidence to create targeted interventions

- Develop actions to monitor and address evidence of different regulatory outcomes from our EDI research, data and intelligence.
- Learn from our in-house research and external research and evidence.
- Learn from external feedback on our processes (i.e. benchmarks and complaints) by implementing recommendations and continuing to submit to external benchmarks.
- Learn from activity such as exit interviews and implement actions to improve colleagues' experiences.



3

Co-produce EDI solutions through collaboration with informed, diverse external partners

- Identify and address gaps in our external stakeholder relationships with those representing EDI issues in order to ensure diverse, informed engagement on our work.
- Collaborate with partners on race and progression issues for colleagues.
- Collaborate with employers and other partners on shared challenges around differential regulatory outcomes for professionals.
- Work with suppliers on their EDI responsibilities.
- Identify and take up opportunities for joint work on tackling health inequalities.

4

Enhance the EDI competency and accountability of our leaders

- Review the purpose and structure of our internal EDI Leadership Group.
- Create targeted EDI initiatives and development opportunities for senior leaders.
- Build and support a pipeline of diverse, talented colleagues.
- Build EDI into the introduction of the new Unitary Board.
- Set leadership EDI objectives for senior leaders.

5

Enhance the EDI capability of all colleagues

- Carry out an EDI learning and development gap analysis across the organisation and fill learning gaps.
- Deliver targeted training and capability-building where there are areas of concern such as learning from cases involving discrimination.
- Produce tools and guidance to support colleagues to feel confident to tackle key equality issues.

6

Map and improve EDI-informed decision-making

- Map regulatory decision-making points to assess whether appropriate mitigations against risk of bias are in place.
- Upskill colleagues to apply context and scrutinise evidence effectively.
- Improve diversity of decision makers including at Council, Executive Board and panels.

7

Address evidence of discrimination or barriers in our processes

- Improve our approach to recruiting, promoting and supporting colleagues' career progression.
- Tighten mechanisms around internal discrimination, bullying and harassment.
- Create a disability working group to act on the Business Disability Forum's feedback.
- Improve accessibility in our communications.
- Evaluate new guidance and training following review of handling discrimination cases.
- Influence and reduce disproportionate fitness to practise referrals.
- Keep the impact of Covid-19 changes under review.
- Review and strengthen organisational competence on minimising the negative impact of our actions on the mental health of colleagues, professionals and customers.
- Review our English Language requirements.
- Support internal employee networks and forums to identify and raise EDI concerns.





Use our influence to support the prevention and reduction of health inequalities

- Respond to consultations and develop guidance on our regulatory role where relevant such as our policy on conversion therapy.
- Sponsor and support external programmes and research which address health inequalities.
- Map the evidence on health inequalities we come into contact with through our regulatory processes with partners.
- Continue our commitment to embed EDI within our standards, quality assurance and revalidation.
- Strengthen our support to Approved Education Institutions (AEIs) to embed EDI within their curriculum and practices.
- Carry out preparatory work to ensure EDI considerations are a core part of the 2025–2026 Code review.



Strengthen our EDI governance

- Implement a refreshed approach to our equality impact assessments.
- Embed EDI into business planning, corporate performance reporting and how we understand and report corporate risk.
- Support the new Change and Continuous Improvement function to embed EDI.
- Review and strengthen internal and external EDI policies.
- Establish clear governance processes for monitoring issues across all four UK countries.



Use regulatory reform as a vehicle to embed EDI in our structures and ways of working

- Develop and publish thorough, informed equality impact assessments on the different elements of the regulatory reform programme.
- Work with partners, stakeholders and the public to understand the potential EDI implications and opportunities of proposed changes under regulatory reform.
- Identify opportunities to better embed EDI in our regulatory functions as part of regulatory reform.

The impact we hope this work will have

We have a three year EDI plan. By the end of year one we will have:

- shared our learning on the impact of Covid-19 on different equality groups and how we can monitor the long-term implications of the pandemic
- follow the publication of the second stage of our Ambitious for Change research by implementing a targeted action plan to improve our processes
- completed a mapping exercise of our equality stakeholder engagement and built new relationships with diverse groups
- undertaken a detailed analysis of the equality impacts of our regulatory reform activities, informed by stakeholder views
- updated guidance on the diversity data monitoring categories we use
- senior leaders who have shared, and are working towards, their EDI objectives
- implemented our new Applicant Tracking System, and begun to use this to capture more comprehensive, EDI data from our recruitment and promotion processes

- reviewed and updated the mechanisms currently in place for colleagues to report bullying, harassment and discrimination and to support people
- reviewed our recruitment processes and implemented inclusive new ways of attracting, recruiting and promoting diverse groups.

By the end of year two we will have:

- the ability to produce nuanced data sets which inform our interventions for colleagues and professionals
- a better grasp on the differences in outcomes for professionals across the four UK countries, with localised data available to more clearly identify where inequalities exist
- undertaken a detailed review into our regulatory decision-making and the robustness of our safeguards against bias to identify opportunities to strengthen our approach

- a cross-organisational approach to improving disability equality through our working group and its activity
- a solid understanding of the gaps in our organisational learning on EDI and have begun to fill them by developing and delivering a comprehensive EDI learning and development programme tailored for specific roles.
- ensured the creation of our new Unitary Board is underpinned by our EDI commitments and is more reflective of the diversity of the professionals we regulate
- a bank of EDI representatives to ensure a trained EDI lead is on every recruitment panel, and begun to map the impact of changes to our recruitment processes

By the end of year three we will have:

- strong relationships with diverse people and groups to enable us to consult with confidence on our work and know we are receiving feedback which represents a range of communities
- consistency in the way we consider, monitor and learn from equality concerns raised in the contextual information provided in fitness to practise cases
- a firmer grasp on what data and evidence we hold on the experiences and outcomes of people receiving poorer care in health services, and a process for sharing our insight and data with partners to tackle sector-wide issues
- built an accurate dataset and insight into equality issues in health provision which will inform the review of the Code in the next strategic period
- comprehensive EDI data to inform our business planning processes
- a new set of ambitious goals for our equality work for 2025 onwards.



How we'll monitor and report progress

Roles and responsibilities

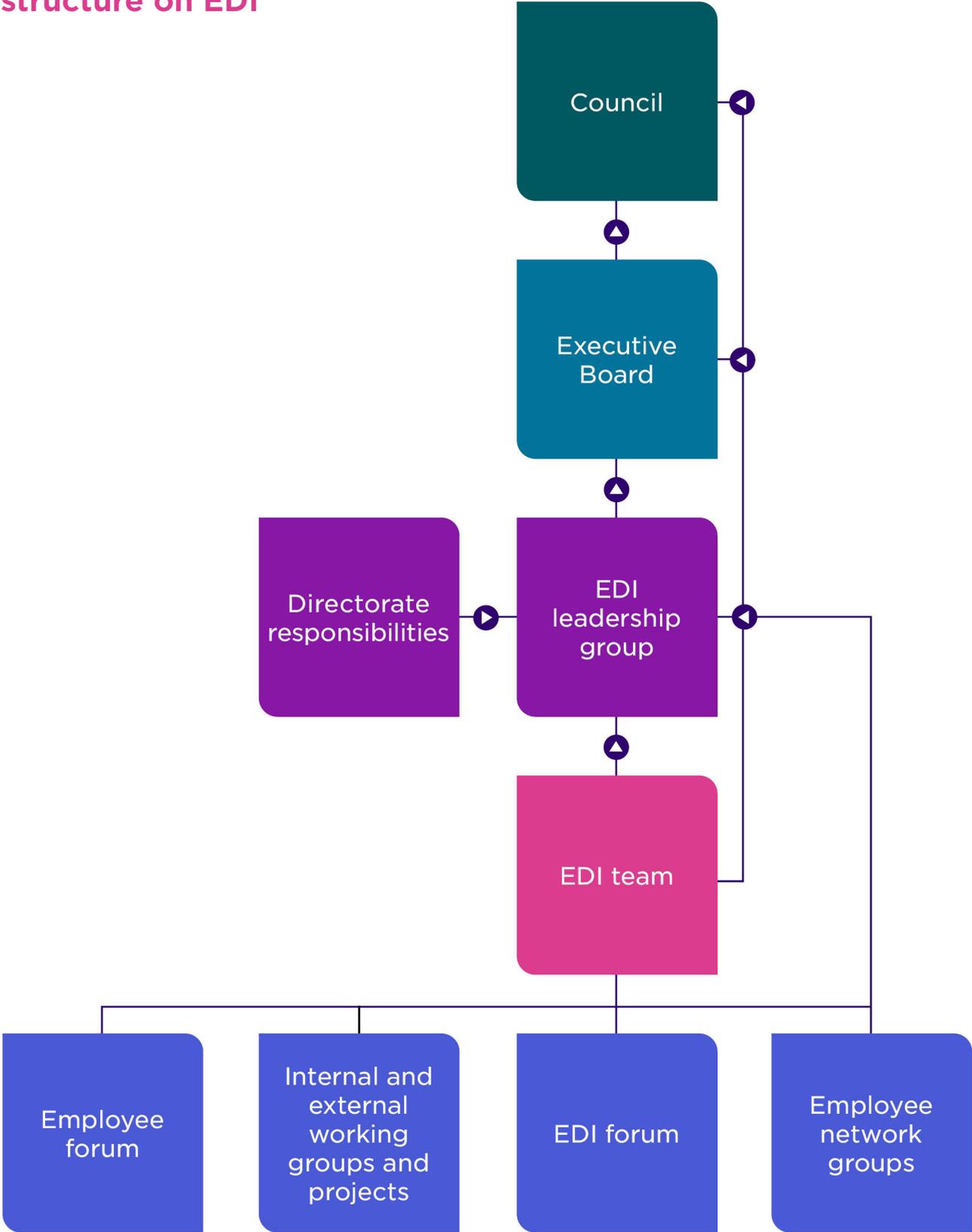
Our Council has an important leadership role in holding the NMC to account for placing EDI at the heart of all it does.

The Chief Executive and Registrar is responsible for agreeing the direction for EDI with support from our Executive Board. The senior sponsor for EDI, the Executive Director for People and Organisational Effectiveness, chairs the internal EDI leadership group which is made up of senior colleagues from across the organisation and also includes the chairs and co-chairs of our employee network groups. The purpose of this group is to facilitate and monitor the delivery of the EDI plan.

All executive directors are expected to incorporate our EDI priorities into their directorate business plans. They're accountable to the Chief Executive and Registrar for making sure the right resources are in place to deliver our EDI priorities.

Employee network groups bring colleagues with shared characteristics and allies together in a safe space. Our groups and the employee forum offer invaluable insight and advice on policy, community and employee engagement.

Our internal governance structure on EDI



Measurement and evaluation

We measure success by analysing data on EDI outcomes, and will measure the impact of our EDI plan using a range of measures, including:

- analysing the EDI data we collect on our internal and external processes, such as recruitment, regulatory processes (for example fitness to practise and registration) and pay gap reports
- measuring progress through EDI benchmarks, such as the Business Disability Forum's Disability Standard and the NHS Workforce Race Equality Standard
- analysing feedback and complaints from the professionals we work with and the public
- feedback from external partners and stakeholders
- analysing our regular employee surveys, including our twice-yearly 'Your Voice' survey and internal submission to the Workplace Race Equality Standard
- commissioning research to address data gaps.

Reporting

Sustainable improvements against the EDI plan measures will be delivered collectively. The actions taken will be monitored as part of our EDI plan by our EDI leadership group members and with the scrutiny of both our Executive Board and Council.

Conclusion

Our EDI plan seeks to build solid internal foundations at the NMC and put us in a better position to respond to the wider external environment.

Our priorities over the next three years will continue to be shaped by significant developments across the sector, including in particular any new evidence about discrimination faced by people using health and care services and the professionals on our register.

Through the delivery of our plan, we aim to create an environment where colleagues feel respected and understand their individual role in relation to EDI, working together to create an organisation which values their contributions. We are committed to ensuring we have fair and accessible processes for nursing and midwifery professionals. We will hold people to account where there is evidence of discrimination, and support those on our register to uphold equality diversity and inclusion in their work in order to deliver safe and effective care for all people and communities.

We're taking action on equality, diversity and inclusion, but we know that we have much more to do. We recognise our responsibility to address the causes of inequalities experienced by professionals, our colleagues and the public, and to meaningfully integrate EDI into how we regulate, support and influence. We'll work with external partners to hear from a range of voices, actively seeking out those who are seldom heard and often marginalised. We'll work to openly share our equality insight and intelligence so that we can collectively make a greater impact on tackling inequality and discrimination across the sector. We want to show leadership and be a trusted, fair and inclusive voice on the issues that matter most to people.

We have developed a clear, focused EDI plan and we're committed to working with professionals, partners and our colleagues to achieve measurable change in the next three years. This will position us to embed best practice EDI considerations in our next Nursing and Midwifery Council strategy for 2025 and beyond.

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