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Addysg a Gwella Iechyd
Cymru (AaGIC)
Health Education and
Improvement Wales (HEIW)

HEIW Integrated Equality Impact Assessment (EIA) June 2024

Integrated Equality Impact Assessment May 2022 V3

Revised June 2024 V4.0

Gareth Lloyd-Richards and Mark Casling



Overview

Please ensure that you have made both the Equality, Diversity and Inclusion (EDI) Lead and The Welsh Language Team aware that you are undertaking the process. The EDI Lead will then allocate a Unique ID* for your EIA.

It is recommended that the accompanying support and guidance document (v9) is consulted when considering and undertaking an Equality Impact Assessment (EIA).

To achieve better outcomes for people an integrated equality impact assessment should be an integral part of the initial development, monitoring or review of the organisation's activities. Ensuring equality is at the heart of our activity through maximising co-production, building upon positive impacts, reducing, or mitigating negative impacts and enhancing our work towards achieving a more equal Wales through our Public Sector Equality Duty (PSED).

To ensure HEIW areas of work are developed, designed, and delivered fairly in accordance with Equality, Welsh Language and Human Rights Legislation, please complete the Integrated Equality Impact Assessment form, highlighting:

- The purpose, aims and objectives of the activity
- How you have engaged and consulted with people who are affected
- What evidence you have used to understand impacts on people
- Actions to be taken to address any negative impacts
- Actions to be taken opportunities for further developing positive impacts
- Specific alignment to socio-economic duty as appropriate
- Specific alignment to the Well-being of Future Generations (Wales) Act 2015
- How you will monitor and review activity

Our Approach

Undertaking an Integrated EIA is a bespoke and proportionate process, one size does not fit all. It is less about compliance and more about doing the right thing to improve services for people, whatever their backgrounds or circumstances

EIA PROCESS



HEIW Integrated Equality Impact Assessment (EIA)

Serial Number	3161
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Notification of undertaking EIA		Registration details		Date EIA initiated:	24 Mar 2025
EDI / EIA Lead	<input checked="" type="checkbox"/>	Type of EIA	Service/Function	Date EIA Agreed:	21 May 2025
Welsh Language Team	<input checked="" type="checkbox"/>	New Work / Review	New Work	Date of EIA Review:	

Title of policy, activity, area of work etc:
Registered Nursing Associate Implementation Programme for Wales
Name of Team / Department / Directorate:
Nursing and Midwifery Workforce Transformation Team delivering the Strategic Nursing Workforce Plan, of which the Registered Nursing Associate (RNA) Programme sits within.
Name, role and contact details of the Individual responsible for the EIA (EIA Responsible Owner):
Emma Davies, HEIW Workforce Lead for Registered Nursing Associates. emma.davies61@wales.nhs.uk
Name, role and contact details of the Individual(s) undertaking the EIA (if not above):
Emma Davies, HEIW Workforce Lead for Registered Nursing Associates. emma.davies61@wales.nhs.uk Annabel Green, Clinical Lead Implementation of the Nursing Workforce Plan.

Section 1 - Purpose, objective and aims

Please provide a brief description of the area of work, including:

- What is the overall objective or purpose?
- What are the stated aims and who are the impacted groups / individuals?
- How will the aims be achieved?
- What will the measure of success be, and the time frame for achieving this?
- How are the purpose and aims relevant to the Equality, Diversity, and Inclusion of the intended beneficiaries?
- If the EIA will cover a review of an existing area of work, the EIA only needs to cover any changes or amendments. These should be identified below.

The Implementation of the Registered Nursing Associate (RNA) role in Wales currently sits within the Strategic Nursing Workforce Plan, however, due to the significance of the programme of work it is a separate strategic objective for the organisation within the 2025-2026 IMTP.

The RNA role will bridge the gap between health care assistants and registered nurses and create a regulated band 4 nursing role within Wales.

Following a Welsh Government (WG) review the minister announced in January 2024, the intention to introduce a regulated band 4 nursing role within Wales, subject to the necessary UK legislative amendments. Throughout 2024 the WG Project team set up four project groups and began pre project planning and implementation of various elements of the project. In January 2025 the project has been transitioned to HEIW for implementation.

The introduction of the Registered Nursing Associate Workforce Implementation Plan is designed to meet the nursing workforce needs, to be equipped to serve the population of Wales and will be aligned to HEIW's strategic objectives, 'A Healthier Wales: Our Plan for Health and Social Care;' (2019), 'A Healthier Wales: our workforce strategy for health and social care' (2020) and the National Workforce Implementation Plan (2023).

Following WG feedback HEIW will interpret and prioritise the agreed recommendations and additional actions over the course of the programme in line with new and emerging research and/or unforeseen and/or unpredicted considerations to ensure the policy position to introduce the RNA role is successfully implemented.

Background

In 2023 the Minister for Health and Social Services and co-led by the Chief Nursing Officer (CNO) Wales and the Director of Workforce and Organisational Development, explored the options and opportunities to inform a policy position and recommendations for the future of the band 4 Nursing workforce. The aim of the first phase of the project was to consider whether a registered and/or regulated band 4 Nursing role was desirable, appropriate and value-adding for NHS Wales, aligned to CNO professional priorities for Nursing and Midwifery (2022-2024): Priority 2 Workforce (WG 2022).

In December 2023 the Welsh Minister for Health and Social Services advised of WG intention that only one band 4 Nursing role will exist in NHS Wales, that of the Registered Nursing Associate, with the Nursing and Midwifery Council (NMC) as the regulator.

Throughout 2024 the WG Project team have set up four project groups and begun pre project planning and implementation of various elements of the project. In January 2025 the Programme and project elements will be transitioned to HEIW to implement.

Overall objective

The Registered Nursing Associate (RNA) Workforce Implementation Plan is designed to meet the nursing workforce needs to be equipped to serve the population of Wales and will be aligned to HEIW's strategic objectives, 'A Healthier Wales: Our Plan for Health and Social Care;' (2019), 'A Healthier Wales: our workforce strategy for health and social care' (2020) and the National Workforce Implementation Plan (2023).

The programme objectives and desired outcomes are based upon implementing the HEIW agreed actions for the RNA programme to introduce the RNA role within NHS Wales. Ultimately with the aim to deliver a motivated, engaged and valued, nursing associate workforce, with the capacity, competence, and confidence to contribute towards meeting the nursing needs of the people of Wales. Achieving this objective will include:

Nursing Workforce Capability.

To developing a capable and versatile RNA workforce that can meet the demands of the health care needs of the populations of Wales. This outcome supports the 'Healthier Wales' vision by ensuring a skilled and adaptable workforce that can deliver high-quality care and improve health outcomes.

Quality Assured Nursing Associate Educational Programmes.

To procure education which is approved by the NMC and ensures RNAs are equipped with the necessary skills and knowledge to meet the needs of NHS Wales Health Boards and Trusts and any specific requirements of the populations of Wales.

Project Management – achieving our aims

HEIW Programme working group has been in place for latter half of 2024, working closely with the WG project leads to update and give access to existing project documentation. HEIW RNA programme working group members were embedded in existing project groups for Phase 2 of the programme.

Existing areas of work - completed by Welsh Government include

'A Data Protection Impact Assessment (DPIA) was completed for the database and logged with the Directorate Information Asset Owner, complying with the Welsh Government Data Protection Policy'.

Parameters of Practice Consultation

Collaborative working with Stakeholders

Introduction of the RNA role across Wales will require robust engagement, to include open, effective, transparent and collaborative stakeholder management. There are a large number of stakeholders who will require thoughtful and clear engagement planning including, Welsh Government, Trade Unions, Professional and Regulatory bodies, Health Boards/Trusts to ensure effective and cohesive introduction and integration of the role into NHS Wales.

Communication and Engagement

Robust and comprehensive communication and engagement to inform the current and future NHS Wales workforce of the scope, benefits and parameters of the role will be produced

HEIW use their education commissioning leverage and strategic partnership working to facilitate an approach where the NHS workforce is more representative of the communities served. While students undertaking health and care programmes come from a range of diverse and socio-economic backgrounds, further improvement is required to increase participation and widen access from under-represented groups for some health education programmes and entry into health professions.

The Registered Nursing Associate programme has been described as a positive example of widening participation, not least with the ability for the RNAs to undertake a bridging programme to become a Registered Nurse. This opportunity was previously

excluded for many based on their educational attainment and socio-economic factors and consequently enhances the Registered Nurse pipeline.

Below demonstrates the number of staff across Health Boards that could be supported in the RNA position or progress towards it in their career. This data has been collected through ESR. The headcounts sit within “additional clinical support” staff group and are currently employed within roles titled “Health care Assistant” or “Health Care Support Worker”.

Band 2: 8762
Band 3: 4648
Band 4: 488

When including the role “Assistant Practitioner Nursing”, these numbers rise to:

Band 2: 8762
Band 3: 4648
Band 4: 1,180

When also considering potential nursing roles that may sit within “assistant and associate practitioner” these numbers rise again (cannot break down ESR data to depict which could have nursing elements.)

Band 2: 9109
Band 3: 5730
Band 4: 2016

Section 1 Completed:

Inclusion Team	Name	Date
	Mark Casling	2 Apr 2025

Section 2 - Evidence of engagement and consultation

We have a legal duty to engage, consult and involve people with one or more protected characteristics under the Equality Act 2010 identified as being relevant to the area of work. Please provide details on:

- What steps you have taken to engage and consult with stakeholders, both internally and externally?
- How have people with protected characteristics been involved in developing the area of work?
- Have you considered engaging with communities and groups during the development of the area of work?
- How have/will proposals be communicated?
- What are the arrangements for engagement as the area of work is being implemented?
- How have/will people hear about engagement events?

- Welsh Government lead the initial scoping and stakeholder engagement. Qualitative and quantitative survey data collection.
- Face to face meetings have been carried out in all Welsh NHS HB/Trusts with workforce representatives by Welsh Government.
- Pre Project-Communications were managed via the WG project team. There are two communication plans that are specific to phase 1 and 2 of the project.
- Phase 3 communication plan is in a draft format to be approved once transition from WG has been confirmed.
- Phase 2 of the project had 4 project groups covering workforce management, parameters of practice, legal and education, these groups have been engaged by WG project leads and have been responsible for beginning the implementation of recommendations.
- HEIW Communications and digital team have been engaged internally

Engagement

Developing an over-arching communications and engagement plan is critical to the success of the implementation plan and this is a key objective of the methodology outlined above. The following points summarise the aim of the communications and engagement plan:

- Raise awareness of the role of the Registered Nursing Associate and how this may differ from current Band 4 nursing roles within Wales
- Raise awareness of the Welsh Government policy position that only one band 4 Nursing role will exist in NHS Wales, that of the Registered Nursing Associate, with the Nursing and Midwifery Council (NMC) as the regulator
- Encourage stakeholder engagement and feedback
- Methods of communication are clear, timely and relevant on an ongoing basis to keep people interested.

Stakeholder Mapping

Key Stakeholders:

- Welsh Government
- Executive Director of Nursing Peer Group
- Directors of Workforce and Organisational Development (DWODS) Peer Group
- Nurse Education Leads within NHS Wales Health Boards and Trusts
- Current band 4 Assistant Practitioners workforce
- Current band 2 and 3 Healthcare assistants (potential future RNA pipeline)
- NHS Wales nursing workforce
- NHS Wales wider workforce
- Social Care Wales workforce
- National Partnership forum
- Royal College of Nursing (RCN)
- Unison
- Nursing and Midwifery Council (NMC)

- Educational institutions
- NHS England/ NHS Education for Scotland/ Northern Ireland Practice and Education Council for Nursing and Midwifery

Super connectors and influencers

Potential Ambassadors:

- Chief Nursing Officer for Wales
- Executive Director of Nursing, Health Professions and Quality HEIW
- Executive Directors of Nursing Wales (EDoNs)
- Nursing and Midwifery Council
- Royal College of Nursing

Section 2 Completed:

	Name	Date
Inclusion Team	Mark Casling	2 Apr 2025

Section 3 - Evidence used and considered in relation to impact on people

What evidence/data sources have you used as part of this EIA? For example:

- General population/NHS Workforce data
- Workforce data (ESR equality breakdown)
- Service users' data, as applicable
- Case studies
- Engagement and involvement findings
- Qualitative and quantitative-based research
- Good practice guidelines
- Participant knowledge

The potential impact on stakeholders must be based on robust evidence which will need to be used to complete section 4

ESR data has been explored and where possible broken down by specific characteristics. The data is only as accurate as what employees have entered the system and the dashboard capability.

For this section, to have parable data and to be as specific as possible the Staff group “Additional Clinical Services” and roles “Assistant Practitioner Nursing, Health Care Support Worker and Health Care Assistant” will be used.

Below image demonstrates the breakdown of age, and gender within the Grade Band 4. This shows that the age of current band 4's within the nursing field peak at age category 36-40 but hold numbers over 100 from age 26 up to 60 years old.

ESR Workforce Workforce Overview

View Value As

- Headcount
- FTE
- Participation Rate

View as Tables

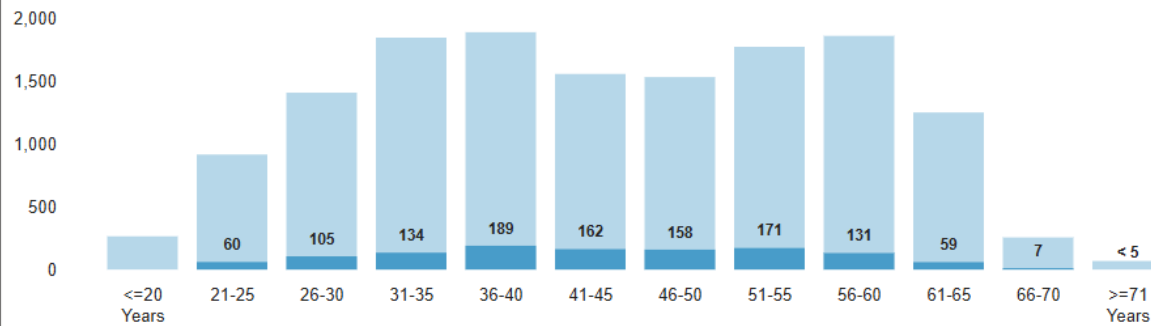
Data as at
Jan 2025

1,180
Headcount

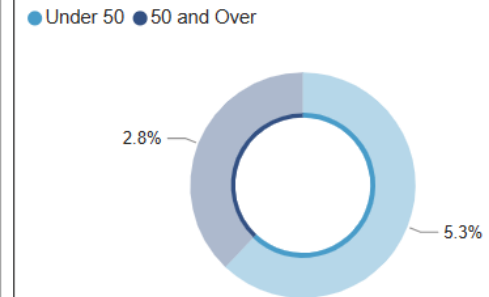
1,053.02
FTE

0.89
Participation Rate

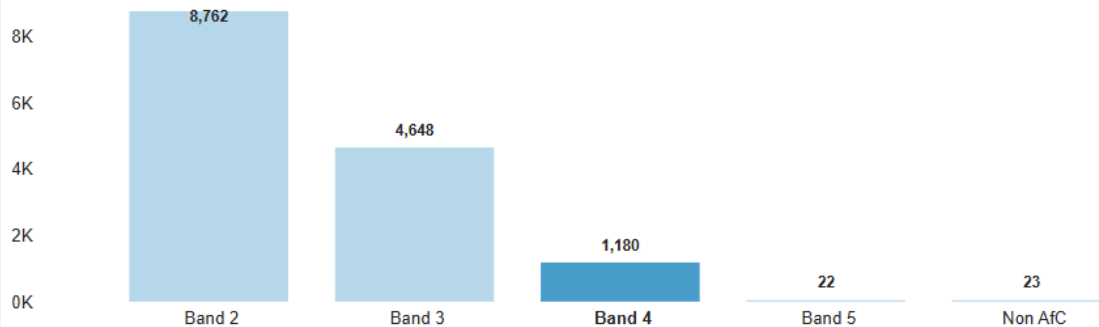
Headcount by Age Band



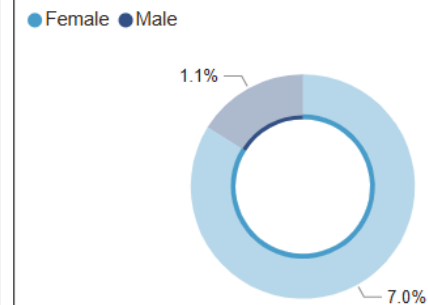
Headcount by Age Category



Headcount by Grade Band



Headcount by Gender



ESR equality data cannot be drilled down by band or role specifically via the dashboard. Below shows the disability status, Nationality, Ethnicity, Religious belief, gender and Sexual orientation of staff sat within the additional clinical services. This data is demonstrative of the workforce and is valid.

ESR Workforce Equality Information

View as Graphs

Data as at
Jan 2025

Disability Status	% of Total Headcount
Yes	5.93%
No	78.63%
Not Disclosed	2.31%
Unknown	13.14%

Nationality	% of Total Headcount
UK	79.62%
EU	1.83%
Non EU	4.73%
EEA	0.00%
Unknown	13.82%

Ethnicity	% of Total Headcount
Unknown	6.55%
Not Stated	2.33%
Other Ethnic Groups	1.23%
White	83.24%
Mixed / Multiple ethnic groups	0.99%
Black / African / Caribbean / Black British	2.00%
Asian / Asian British	3.66%

Religious Belief	% of Total Headcount
Atheism	17.03%
Buddhism	0.39%
Christianity	39.57%
Hinduism	0.69%
Islam	1.17%
Jainism	0.00%
Judaism	0.00%
Sikhism	0.06%
Other	14.31%
I do not wish to disclose my religion/belief	13.73%
Unknown	13.04%

Gender	% of Total Headcount
Female	82.76%
Male	17.24%

Sexual Orientation	% of Total Headcount
Bisexual	1.37%
Gay or Lesbian	2.05%
Heterosexual or Straight	79.27%
Other sexual orientation not listed	0.20%
Undecided	0.16%
Not stated (person asked but declined to provide a response)	4.00%
Unknown	12.95%

3.0

Disability Status: Ensuring accessibility and reasonable adjustments in the workplace is crucial to support the 5.93% of staff with disabilities and those who have not disclosed their status.

Nationality: With 79.62% of staff from the UK and a smaller percentage from the EU and Non-EU countries, cultural competency training and support for international staff are essential for fostering an inclusive environment.

A two-tier workforce would be where there is a greater proportion of global majority staff working in Nursing support roles and a predominance of white staff working as Registered Nurses. UNISON has indicated that a high proportion of Student Nursing Associate applicants are from global majority communities.

Ethnicity: As 16.76% of the workforce identifies as non-White or unknown, diversity and inclusion initiatives should focus on reducing disparities and ensuring equal opportunities for career progression.

Religious Belief: Considering the wide range of religious beliefs among staff, it is important to accommodate religious practices, provide appropriate spaces for worship, and promote cultural awareness in patient care.

Gender: With 82.76% of the workforce being female, policies should address gender equality, flexible working arrangements, and career advancement opportunities for all genders. It is important to acknowledge that female life events, including pregnancy, maternity, and menopause, may impact work schedules and time-off requirements, and as such, these factors should be thoughtfully considered when addressing the needs of the staff group

Sexual Orientation: As 79.27% identify as heterosexual while a notable proportion belong to the LGBTQ+ community or have undisclosed preferences, fostering an inclusive workplace free from discrimination is vital.

Section 3 Completed:

	Name	Date
Inclusion Team	Mark Casling	2 Apr 2025

Section 4 - Analysing the impacts on protected characteristics

Using the evidence collated in section 3 please identify the potential impacts on stakeholders and record:

- How do you intend to maximise positive opportunities?
- Actions to be taken to address negative impacts regarding each of the protected characteristics:

Protected Characteristic	Potential positive impacts and actions to maximise opportunities	Potential negative impacts and actions to mitigate
4.1 Age		
<p>For most purposes, the main categories are:</p> <ul style="list-style-type: none"> • under 18. • between 18 and 65 • over 65 	<ul style="list-style-type: none"> • The RNA role can provide career progression opportunities for younger healthcare assistants, encouraging them to stay within the NHS. • Older workers may benefit from the structured career pathway, which may include more flexible working arrangements. <p>Actions</p> <ul style="list-style-type: none"> • Promote the RNA role as a career development opportunity for all age groups. • Identify support systems where experienced nurses can guide RNAs of all ages, recognising different requirements. 	<ul style="list-style-type: none"> • Younger RNAs may face challenges in gaining acceptance from more experienced colleagues. • Older workers might need additional training to adapt to new roles. <p>Actions</p> <ul style="list-style-type: none"> • Consider the programme requirements to support all age groups in the RNA role and training. • Encourage an inclusive workplace and learning culture that values contributions from all ages.

4.2 Persons with disability as defined in the Equality Act 2010:

<p>Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes</p>	<ul style="list-style-type: none"> • Where possible, the RNA educational programmes will accommodate individuals with disabilities, providing meaningful employment opportunities. • Where possible, flexible education and training arrangements can support SNAs with disabilities. <p>Actions</p> <ul style="list-style-type: none"> • Ensure recruitment processes to educational programmes are accessible to individuals with disabilities. • NHS employers and education providers in Wales have responsibility to provide, as appropriate support to individuals with disabilities. 	<ul style="list-style-type: none"> • The different demands of the role (e.g. physical) may be challenging for some individuals with disabilities. <p>Actions</p> <ul style="list-style-type: none"> • NHS Employers' and Education Providers responsibility to conduct assessments to identify and implement any necessary adjustments.
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4.3 Gender reassignment:

<p>Consider men, women, people undergoing gender reassignment and those who are non-binary and or intersex and may use pronouns.</p> <p>NB Gender-reassignment is anyone who proposes to, starts, is going through or has completed a process to change his or her gender with or without going</p>	<ul style="list-style-type: none"> • The RNA role can provide a supportive career pathway for individuals undergoing gender reassignment. <p>Actions</p> <ul style="list-style-type: none"> • Promote an inclusive education and learning environment that respects and supports gender diversity. 	<ul style="list-style-type: none"> • Individuals undergoing gender reassignment may face discrimination or lack of understanding from colleagues. <p>Action</p> <ul style="list-style-type: none"> • Promote an inclusive learning environment that respects and supports gender diversity.
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through any medical procedures.		
4.4 People who are married or have a civil partnership.		
	<ul style="list-style-type: none"> The RNA role can offer stable employment, benefiting individuals in marriages or civil partnerships. <p>Action</p> <ul style="list-style-type: none"> No action required 	<ul style="list-style-type: none"> Education demands may impact personal relationships. <p>Action</p> <ul style="list-style-type: none"> Encourage where necessary support for work-life balance Promote self-compassion.
4.5 Pregnancy and maternity		
	<ul style="list-style-type: none"> The RNA education programmes will be suitable for individuals who are pregnant or returning from maternity leave. <p>Actions</p> <ul style="list-style-type: none"> Promote use of maternity leave policies that are supportive and inclusive. encourage use of return-to-education and training programmes to support as required. 	<ul style="list-style-type: none"> Pregnancy and maternity may temporarily limit the ability to perform certain tasks. <p>Actions</p> <ul style="list-style-type: none"> When required and if possible, temporary adjustments to duties and provision of additional support during pregnancy and maternity.
4.6 People of different races, nationalities, colour, cultures or ethnic origins including non-English speakers, gipsies/travellers, and migrant workers.		
	<ul style="list-style-type: none"> The RNA role can enhance diversity within the nursing workforce, reflecting the communities served. <p>Actions</p>	<ul style="list-style-type: none"> Risk of a two-tier workforce with racial disparities in roles. <p>Actions</p> <ul style="list-style-type: none"> Monitor diversity and seek to address any disparities.

	<ul style="list-style-type: none"> Open and transparent recruitment process to all. 	<ul style="list-style-type: none"> promote equal opportunities for career progression.
4.7 Religion or Belief		
Religion includes any religion as well as lack of religion. Belief means any religious or philosophical belief.	<ul style="list-style-type: none"> The RNA role can accommodate diverse religious or non-religious beliefs and practices. <p>Actions</p> <ul style="list-style-type: none"> Provide an open and transparent recruitment process to all. 	<ul style="list-style-type: none"> Conflicts may arise between work schedules and religious practices. <p>Actions</p> <ul style="list-style-type: none"> Where possible and required consider different religious practices and their requirements.
4.8 Sexual Orientation		
A person's orientation towards people of the same sex, the opposite sex or more than one gender.	<ul style="list-style-type: none"> The RNA role can provide a supportive environment for individuals of all sexual orientations. <p>Actions</p> <ul style="list-style-type: none"> Promote an inclusive workplace and educational culture that respects all sexual orientations. 	<ul style="list-style-type: none"> Risk of discrimination or harassment based on sexual orientation. <p>Actions</p> <ul style="list-style-type: none"> Encourage an inclusive workplace and educational culture that fosters a zero tolerance to discrimination or harassment,

4.9 Sex/Gender		
	<ul style="list-style-type: none"> The RNA role can promote gender equality within the nursing workforce. <p>Actions</p> <ul style="list-style-type: none"> Encourage both men and women to pursue the RNA role. 	<ul style="list-style-type: none"> Gender stereotypes may affect the perception of the RNA role. <p>Actions</p> <ul style="list-style-type: none"> Challenge gender stereotypes through role marketing campaigns and communication strategy.
4.10 Carers		
<p>A carer is anyone, including children and adults who looks after a family member, partner or friend who needs help because of health condition, physical, sensory, cognitive, learning, or mental health impairment and cannot cope without their support. The care they give is unpaid</p>	<ul style="list-style-type: none"> The RNA education programmes may be able to offer flexible working arrangements, benefiting individuals with caregiving responsibilities. <p>Actions</p> <ul style="list-style-type: none"> Encourage education providers to consider support and resources for SNAs who carers are. 	<ul style="list-style-type: none"> Balancing education and caregiving responsibilities may be challenging. <p>Actions</p> <ul style="list-style-type: none"> When appropriate and possible, consider flexible education and training hours to support the SNA.
4.11 Welsh Language Opportunities for persons to use the Welsh Language.		
<p>Treating the Welsh language, no less favourably than the English language.</p>	<ul style="list-style-type: none"> The RNA role can promote the use of the Welsh language in healthcare and education settings. <p>Actions</p>	<ul style="list-style-type: none"> May be constraints for education providers to deliver full programmes in Welsh. <p>Actions</p> <ul style="list-style-type: none"> Highlight the importance of the Welsh language for the population of Wales.

	<ul style="list-style-type: none"> Encourage Welsh language training and use in the training and implementation plan. 	
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4.12 British Sign Language (BSL)

Creating opportunities for those who consider BSL as a first or preferred language.	<ul style="list-style-type: none"> The RNA role can create opportunities for BSL users. <p>Action</p> <ul style="list-style-type: none"> Encourage BSL training and consider it within education and training programmes. 	<ul style="list-style-type: none"> Lack of BSL proficiency among staff may limit communication. <p>Actions</p> <ul style="list-style-type: none"> Showcase BSL training.
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Section 4 Completed:

	Name	Date
Inclusion Team	Mark Casling	27 Mar 2025

Section 5 - An Anti-Racist Wales

To achieve an anti-racist public sector in Wales, The Welsh Governments Anti-racist Wales Action Plan 2022 has outlined the following aims:

- To demonstrate a visible commitment to anti-racism
- To embed ways of working to tackle racism
- To embed accountability and demonstrate progress

Considering the impacts identified under 4.6, please highlight below how this area of work can contribute to the aims outlined in the Anti-racist Wales Action Plan.

The implementation of the Registered Nurse Associate (RNA) role supports the Welsh Government's Anti-racist Wales Action Plan 2022 by:

Commitment to Tackling Racism

- Promoting Diversity: Actively recruiting RNAs from diverse backgrounds and providing cultural competence training.
- Supportive Environment: Establishing mentorship programmes and enforcing anti-discrimination policies.
- Community Engagement: Engaging with ethnic minority communities and creating feedback mechanisms.

Embedding Accountability

- Monitoring: Collecting and analysing workforce data and publishing regular progress reports.
- Leadership: Ensuring inclusive leadership and clear accountability structures.
- Continuous Improvement: Regularly reviewing policies and involving stakeholders in decision-making.

These actions demonstrate a strong commitment to tackling racism and embedding accountability within the healthcare system.

Section 5 Completed:

	Name	Date
Inclusion Team	Mark Casling	27 Mar 2025

Section 6 - Socio-Economic Duty - A More Equal Wales

Section 1 of the Equality Act 2010 – the socio-economic duty requires HEIW when making strategic decisions such as ‘deciding priorities and setting objectives, to consider how its decisions might help to reduce the inequalities associated with socio-economic disadvantage.

Please highlight below how the strategic decision can help to reduce the inequalities of outcome associated with socio-economic disadvantage in both places and communities of interest in Wales:

The strategic decision to implement the Registered Nurse Associate (RNA) role can help reduce inequalities associated with socio-economic disadvantage in Wales by addressing several key areas:

1. Improving Access to Employment

- Career Pathways: The RNA role provides a structured career pathway for healthcare assistants, enabling them to progress to a regulated band 4 nursing role. This can improve job security and income for individuals from socio-economically disadvantaged backgrounds[1].
- Inclusive Recruitment: Actively recruiting RNAs from diverse socio-economic backgrounds ensures that employment opportunities are accessible to all communities[2].

2. Enhancing Education and Training

- Accessible Training Programmes: Offering accessible and affordable training programmes for the RNA role can help individuals from disadvantaged backgrounds gain the necessary qualifications and skills[1].
- Supportive Learning Environment: Providing support such as mentorship and flexible learning options can help individuals balance education with other responsibilities, reducing barriers to entry[2].

3. Promoting Health Equity

- Community Representation: By ensuring that RNAs reflect the diversity of the communities they serve, healthcare services can be more culturally competent and responsive to the needs of socio-economically disadvantaged groups[1].
- Improved Healthcare Access: RNAs can help bridge gaps in healthcare provision, particularly in underserved areas, improving access to quality healthcare for disadvantaged populations[2].

4. Supporting Economic Stability

- Stable Employment: The RNA role offers stable and regulated employment, which can contribute to economic stability for individuals and their families[1].
- Economic Mobility: By providing opportunities for career advancement, the RNA role can help individuals move out of socio-economic disadvantage and improve their overall economic situation[2].

5. Fostering Inclusive Communities

- **Community Engagement:** Engaging with communities to understand their specific needs and challenges ensures that the RNA role is implemented in a way that supports socio-economic inclusion[1].
- **Collaborative Efforts:** Working with local organisations and stakeholders to promote the RNA role can help build stronger, more inclusive communities[2].

By focusing on these areas, the strategic decision to implement the RNA role can contribute to reducing inequalities of outcome associated with socio-economic disadvantage in both places and communities of interest in Wales.

References

[1] [SEP EQUALITY PLAN OUR STRATEGIC - heiw.nhs.wales](#)

[2] [Foreword - heiw.nhs.wales](#)

Bibliography

[1] [A More Equal Wales – Commencing the Socio-economic Duty](#)

[2] [Consultation on the strategic Equality Plan 2024 to 2028 ... - GOV.WALES](#)

[3] [Child Poverty Strategy for Wales 2024](#)

[4] [Child Poverty Strategy for Wales 2024](#)

[5] [Our Plan for Equality in Wales](#)

Section 6 Completed:

	Name	Date
Inclusion Team	Mark Casling	27 Mar 2025

Section 7 - Alignment to Wellbeing of Future Generations (Wales) Act 2015.

How does the activity embed, and prioritise the Well-being Goals and Sustainability Development Principle of the Wellbeing of Future Generations (Wales) Act 2015?

A globally responsible Wales

A prosperous Wales

A resilient Wales



A healthier Wales




A more equal Wales

A Wales of cohesive communities

A Wales of vibrant culture and thriving Welsh language

Please describe and provide evidence below of how the 5 ways of working have been met, inclusive of the 7 well-being goals, to maximise the social, economic, environmental, and cultural wellbeing of people and communities in Wales.

Sustainable Development Principles	
	<p>Long Term - Balancing the short term with long term needs</p> <p>Sustainable Development: Ensuring the RNA role contributes to long-term sustainability in healthcare by addressing future workforce needs and promoting continuous professional development.</p>
	<p>Collaboration - Working together to deliver objectives</p> <p>Partnerships: Working with various stakeholders, including educational institutions, healthcare providers, and community organisations, to support the successful implementation of the RNA role</p>

	Involvement - Involving those with an interest and seeking their views	
	Prevention – Putting resources into preventing problems from occurring or getting worse	
	Integration - Considering the impact on all well-being goals together and on other bodies	
Section 7 Completed:		
Inclusion Team	Name	Date
	Mark Casling	27 Mar 2025

Section 10 - EIA Summary

Please provide a summary of the key findings from across sections 4 - 8, including any:

- Themes identified
- Negative impacts
- Positive impacts

The document outlines the implementation plan for the Registered Nursing Associate (RNA) role, detailing the objectives, scope, and expected impact on healthcare services. It highlights the importance of RNAs in bridging the gap between healthcare assistants and registered nurses, thereby enhancing patient care and workforce efficiency. The plan emphasises the structured training, education, and regulatory requirements necessary for successful implementation, ensuring RNAs are equipped with the competencies required for safe and effective practice.

Key considerations include workforce planning, recruitment strategies, and the integration of RNAs into existing teams. The document discusses potential challenges such as role clarity, supervision requirements, and acceptance within multidisciplinary teams. It also stresses the significance of collaboration between healthcare providers, education institutions, and regulatory bodies to establish clear career progression pathways and maintain high standards of care.

Additionally, the plan assesses the equality impact of implementing the RNA role, ensuring that recruitment and career development opportunities are inclusive and accessible to diverse populations. Strategies to mitigate potential disadvantages and promote fair access to training programmes are highlighted. The document concludes by outlining the evaluation methods for monitoring the effectiveness of the implementation, aiming for continuous improvement in patient outcomes and workforce sustainability.

Section 10 Completed:

	Name	Date
Inclusion Team	Mark Casling	2 Apr 2025

Section 11 - EIA Action Plan

Please outline the actions to address potential negative impacts or to maximise the positive impacts identified as part of this EIA.

Action	Lead	Expected Outcome of action	Timescale	Measurement of expected outcomes
Actively target recruitment from disadvantaged groups i.e. care experienced.	HEIW	Receive applications from these disadvantaged groups i.e. care leavers		Secured placements on the programme. Feedback from recruited individuals.
Consider learning and workforce requirements that support individuals with protected characteristics in the RNA role and training programme.	HEIW/HEIs	The RNA education and training programme accommodate diverse needs		A programme, policies and procedures that provides consideration for all. Feedback.
Encourage an inclusive workplace and learning culture that values everybody.	HEI	The RNA training programme delivery fosters an inclusive culture.		Student feedback and positive attrition rates.
Promote the RNA role as a career development opportunity for all	HEIW/HEI	Greater awareness and uptake of the RNA role across diverse groups.		Number of applications from diverse backgrounds; enrolment and retention statistics.
Identify support systems where experienced nurses can guide RNAs, recognising individual needs.	HEI/NHS Employers	Have experienced registered nurses and RNA's supporting the trainee and new RNAs in practice.		Number of mentors and programmes established; feedback from mentors and mentees on effectiveness.

Ensure recruitment processes are parable, open and accessible to all.	HEW/HEI	Have a recruitment process that attracts diverse applicants and ensures fair opportunities		Diversity statistics of applicants and recruits; retention and satisfaction rates.
NHS employers and education providers in Wales have responsibility to provide appropriate support to individuals with protected characteristics including but not limited to amendments of tasks, flexible working and maternity procedures.	NHS Employers/ HEI	More equitable access to education and employment for individuals with protected characteristics.		Implementation of support programmes; feedback from staff and students regarding accessibility and inclusivity
Promote self-compassion and compassionate cultures	HEIW	A more supportive and psychologically safe work environment.		Staff well-being survey results, reduced stress-related absences, feedback on workplace culture.
Monitor diversity and seek to address any disparities.	HEIW	A more inclusive and diverse workforce with equitable opportunities.		Workforce diversity reports, representation in leadership roles, staff satisfaction surveys on inclusivity.
Highlight the importance of the Welsh Language and encourage Welsh language training and use in the training and implementation plan.	HEIW	Increased integration of Welsh language skills in the workplace and training programmes.		Number of staff enrolled in Welsh language training, frequency of Welsh language use in the workplace, feedback on language accessibility.
Showcase BSL training, encourage its use and consider it within training.	HEIW	Improved communication accessibility for deaf and hard-of-hearing individuals.		Number of staff trained in BSL, integration of BSL into daily practices, feedback from deaf employees and service users

Section 11 Completed:		
Inclusion Team	Name	Date
	Mark Casling	7 Apr 2025

Section 12 - Monitoring Arrangements

What is the likely impact this area of work will have on stakeholders?

- Significant Impact
- Medium Impact
- Low impact

This EIA will help anticipate the likely effect however, the final impact may only be known after the implementation of the area of work

Please detail:

- What are the plans to monitor the actual and/or final impact?
- What are the proposals (including timescales) for reviewing and reporting the actual impact?

Both HEIW and HEIs have quality and assurance models to monitor the impact of the actions set. Collecting longitudinal workforce data provides an understanding of workforce demographics, and where individuals with protected characteristics learn and work, which in turn supports accurate future workforce modelling. The data will be reviewed annually along with the 10 year programme.

EIA Completion Certificate

As the EIA Responsible Owner, I confirm that the potential equality impact is as follows:

No impact has been identified for one or more protected groups.	
Positive impact has been identified for one or more protected groups.	
Negative impact has been identified for one or more protected groups.	
Both positive and negative impact has been identified for one or more protected groups.	X

Wherever possible mitigations have been put in place to reduce the negative impact, or the associated risks have been accepted. Actions have been recorded in Section 11 – EIA Action Plan.

EIA Responsible Owner:

Name	Emma Davies	Date	21/05/2025
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I am satisfied that this EIA has been completed as fully as practicable and the identified impacts on individuals and groups with Protected Characteristics have been duly considered.

EDI Lead:

Name	Mark Casling	Date	7 Apr 2025
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The completed EIA will be published to the relevant Internet and intranet sites as required under The Equality Act 2010 (Statutory Duties) (Wales) Regulations 2011.

EIA Published:

Name	Mark Casling	Date	1 Oct 2025
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EIA Review Log

Review Date	Name of Reviewer	Changes	Version Published

Thank you for completing this Integrated Equality Impact Assessment (EIA)



For further guidance, assistance, and submission, please contact HEIW.Inclusion@wales.nhs.uk