

Full equality analysis form

Date of Assessment	Draft equality assessment - May 2014 Revised equality assessment – August 2014
Assessor name and Job title	Mark Smith: Director, Corporate Services
Directorate and Team	Corporate Services
Name of policy	NMC Fee Rise Project
The aims, objectives and projected outcomes of the policy	The NMC proposes to increase the registration fee from £100 per year to £120 per year to maintain current funding levels when the UK government grant of £20 million ends in March 2015. This is required in order for the NMC to continue to effectively deliver its regulatory functions and other commitments in order to protect the public.

What is the scope of the EA work?

The scope of the Equality Analysis (EA) for the consultation on increasing the fee for admission, retention and renewal of nurses and midwives' registration with the NMC will focus on whether the fee increase impacts adversely on those with protected characteristics as defined in the Equality Act 2010.

The draft EA completed ahead of the Fee Rise Consultation has been revised following the completion of the consultation period. The views of consultees around the potential impact of a fee rise on protected characteristics have been considered and assessed. A corresponding equality analysis is included in the NMC's conclusions document.

The NMC's general legal duty under Section 149 of the Equality Act 2010 is to have due regard to the need to:

- Eliminate discrimination, harassment, victimization or other conduct prohibited by the Act;
- Advance equality of opportunity between persons who share a relevant protected characteristic and those who do not; and,
- Foster good relations between those who share a relevant protected characteristic and those who do not.

The NMC must publish, under its specific duties, (unspecified) information to demonstrate compliance with the general duty.

If analysis shows a protected characteristic is or may be adversely affected by the proposed policy, that policy may still proceed if it can be demonstrated that it is a proportionate way of achieving a legitimate aim.

1. Gathering and examining evidence

What evidence will you use to assess impact on equality?

The NMC has utilised the diversity data collected from its registrants when they initially are admitted to the register and when they renew. This is collected from the voluntary completion of equality screening forms. At the time of writing, the NMC has diversity information for 306,076 registrants (approximately 45% of all registrants – ‘the sample’). This represents a statistically significant sample of the nurses and midwives currently on the register.

The NMC has also made use of the statistics collated by the Government through its National Careers Service¹. This provided the typical earnings for nurses and midwives across the UK for comparisons with the NMC’s proposed increase and the fees of other professional regulators and bodies’ fees and their registrants/members ability to meet those costs. We have also considered the 4,532 responses to the consultation on the proposed fee increase which have been compiled for the NMC by the independent agency Alpha Research.

2. Impact on equality

Age	<p>The age of nurses and midwives in the sample is set out below:</p> <ul style="list-style-type: none">• 19-29 years - 20.86%• 30-39 years - 22.44%• 40-49 years - 29.53%• 50-59 years - 21.12%• over 60 years -6.04% <p>In our consultation 46% of respondents answering the relevant question indicated they were under 45, while 54% indicated they were over 45.</p> <p>In our consultation, respondents were invited to set out their views on the impact of the proposed fee rise through free text answers to questions 1-3. Specifically related to age, question 19 asked over 55s whether increasing the registration fee would be likely to impact</p>
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¹ <https://nationalcareersservice.direct.gov.uk/Pages/Home.aspx>

	<p>on their decision to continue working as a nurse or midwife, if at all.</p> <p>Over half (56%) of all over 55s (307 of 549 people answering this question) said it was likely to impact on this decision. There was general disagreement with the proposal to increase the registration fee amongst all age groups, but nursing and midwifery students were significantly more likely than other groups to agree with this proposed change.</p> <p>One organisation that responded to the consultation had conducted its own survey of 1251 people most of whom we assume to be NMC registrants. 224 were over 55 years of age, and of those who responded when asked whether an increase in NCM fees would influence their decision to retire and return to practise working reduced hours, 50.8% said it would not be economical to return to work on a part-time basis.</p> <p>We have concluded that there is an indicative view in responses to our consultation that could show an impact of increasing the registration fee on over 55s. Having paid due regard to this, we believe that a fee rise is objectively justified and proportionate to achieve the legitimate aim of enabling us to protect the public by ensuring we have sufficient funding to achieve the statutory requirements placed upon us to the expected standards. Not to do so would have significant public protection implications as set out in our consultation document.</p> <p>To mitigate the potential impact of a fee rise we are looking to introduce payment of the registration fee in installments as soon as we are able to as we recognise that this will help to spread the cost of regulation to individuals to make payment more manageable. We have recently launched a consultation seeking to gain the legal ability to collect the registration fee in installments here.</p> <p>In addition, Nurses and midwives are able to claim tax relief on their registration fee through HM Revenue and Customs (HMRC). Our research suggests 50% of or registrants are not aware of this so we have sought to promote this with them, and urged them to do so. A claim for tax relief would reduce the proposed fee to £96, and less for higher-rate taxpayers.</p>
Disability	<p>At the time of writing, the number of people from the sample who voluntarily self-declared that they have a disability is 10%.</p> <p>In our consultation 9% of respondents answering the relevant</p>

	<p>question indicated that they were disabled. In our consultation, respondents were invited to set out their views on the impact of the proposed fee rise through free text answers to questions 1-3.</p> <p>Consultation responses, MP letters received, parliamentary questions and the e-petition regarding the fee rise did not identify a disability impact from our proposal to increase the registration fee to £120.</p> <p>Our current and proposed fee is the lowest (save for the HCPC) charged by the UK healthcare professionals regulators or their representation bodies for registration / membership .There is no evidence to suggest that the increase in fees would place disabled people at a substantial disadvantage compared to those without a disability nor that there is an adverse impact in relation to the protected characteristic of disability.</p>
Gender	<p>The majority of nurses and midwives from the sample are female (90.62%). Given that the majority of registrants are female, there is an increased likelihood of registrants taking maternity leave, a career break or working part time.</p> <p>The consultation identified the part-time/full-time profile of respondents (question 9) and respondents were invited to set out their views on the impact of the proposed fee rise through free text answers to questions 1-3. A number of individual's (24 % of those answering the relevant question) in response to our consultation stated they worked part-time (up to 30 hours per week); some of these individuals set out that it was to look after their children.</p> <p>We have looked to gather further information, and found that 1 in 5 women do not have children by the age of 45², meaning 4 in 5 women will have children and therefore be entitled to maternity leave and be more likely to work part time. The average number of children per women in the UK (the fertility rate) in 2012 was 1.94³. Of our registrants, 44.31% are under the age of 40. So, many of our registrants are likely to take maternity leave and are likely to work part time during their careers, and are therefore likely to have to pay the full registration fee during such times.</p> <p>Some consultees suggested that a discounted fee should apply to</p>

² <http://www.ons.gov.uk/ons/rel/fertility-analysis/cohort-fertility--england-and-wales/2011/sty-1-in-5-women-are-childless-at-45.html>

³ <http://www.ons.gov.uk/ons/rel/vsob1/birth-summary-tables--england-and-wales/2012/stb-births-in-england-and-wales-2012.html>

	<p>those on maternity leave or working part time. We have considered this option but do not believe that a varied fee based on full or part time working, or maternity, would be viable. The cost of regulation is determined by the activities we have a statutory duty to undertake as set out in our consultation document. If some registrants paid less, others would have to pay a significantly higher registration fee; we do not believe this is justifiable, nor proportionate when our current and proposed fee is the lowest (save for the HCPC) charged by the UK healthcare professionals regulators or their representation bodies for registration / membership.</p> <p>We have concluded that the registration fee, and any increase to it, may disproportionately affect women given the NMC registrant base and increased likelihood of women to take maternity leave or work part time, during which time their earnings may decrease. However, we believe that the proposed fee rise is a proportionate response to achieving the legitimate aim of enabling us to protect the public by ensuring we have sufficient funding to achieve the statutory requirements placed upon us to the expected standards. Not to do so would have significant public protections implications as set out in our consultation document.</p> <p>To help to mitigate this impact we are proposing to introduce payment of the registration fee in instalments as soon as we are able to as we recognise that it will help to spread the cost of regulation to individuals to make payment more manageable. We have recently launched a consultation seeking to gain the legal ability to collect the registration fee in instalments here.</p> <p>In addition, Nurses and midwives are able to claim tax relief on their registration fee through HM Revenue and Customs (HMRC). Our research suggests 50% of or registrants are not aware of this so we have sought to promote this with them, and urged them to do so. A claim for tax relief would reduce the proposed fee to £96, and less for higher-rate taxpayers.</p>
Gender Reassignment	<p>The NMC does not request this information from registrants so does not have any data on this protected characteristic in the sample.</p> <p>In our independent consultation report, no information on gender reassignment has been provided. In our consultation, respondents were invited to set out their views on the impact of the proposed fee rise through free text answers to questions 1-3.</p> <p>Consultation responses, MP letters received, parliamentary questions and the e-petition regarding the fee rise have not raised or</p>

	<p>presented any evidence of an adverse impact on the protected characteristic of gender reassignment from our proposal to increase the registration fee to £120.</p> <p>The proposed fee of £120 will apply equally across all registrants and there is no evidence to indicate any particular adverse impact on the protected characteristic of gender reassignment</p>
Marriage and Civil Partnership	<p>The NMC does not request or collect information on the marriage or civil partnership status of any applicant or registrant, so does not have any data on this protected characteristic in the sample.</p> <p>In our consultation responses, 69% of those answering the relevant question indicated that they were married or in a civil partnership. In our consultation, respondents were invited to set out their views on the impact of the proposed fee rise through free text answers to questions 1-3.</p> <p>Consultation responses, MP letters received, parliamentary questions and the e-petition regarding the fee rise have not raised or presented any evidence of an impact on the basis of marriage or civil partnership status from our proposal to increase the registration fee to £120.</p> <p>The proposed fee of £120 will apply equally across all registrants and there is no evidence to indicate any particular adverse impact on the protected characteristic of marriage and civil partnership.</p>
Pregnancy/ Maternity	<p>The NMC does not request or collect information on pregnancy or maternity status of registrants, so does not have any data on this protected characteristic in the sample.</p> <p>We believe that our assessment above for the 'gender' protected characteristic, equally applies to this protected characteristic.</p> <p>We have therefore concluded that the registration fee, and any increase to it, may disproportionately affect women given the NMC registrant base and increased likelihood of women to take maternity leave or work part time, during which time their earnings may decrease. However, having paid due regard to this, we believe that a fee rise is objectively justified and proportionate to achieve the legitimate aim of enabling us to protect the public by ensuring we have sufficient funding to achieve the statutory requirements placed upon us to the expected standards. Not to do so would have significant public protections implications as set out in our consultation document.</p> <p>The cost of regulation is determined by the activities we have a</p>

	<p>statutory duty to undertake as set out in our consultation document. If some registrants paid less, others would have to pay a significantly higher registration fee; we do not believe this is justifiable, nor proportionate when our current and proposed fee is the lowest (save for the HCPC) charged by the UK healthcare professionals regulators or their representation bodies for registration / membership.</p> <p>To mitigate this impact we are proposing to introduce payment of the registration fee in instalments as soon as we are able to as we recognise that it will help to spread the cost of regulation to individuals to make payment more manageable. We have recently launched a consultation seeking to gain the legal ability to collect the registration fee in instalments here.</p> <p>In addition, Nurses and midwives are able to claim tax relief on their registration fee through HM Revenue and Customs (HMRC). Our research suggests 50% of or registrants are not aware of this so we have sought to promote this with them, and urged them to do so. A claim for tax relief would reduce the proposed fee to £96, and less for higher-rate taxpayers.</p>
Race	<p>The sample shows the following profile of NMC registrants:</p> <ul style="list-style-type: none"> • 86.13% of NMC registrants are of white ethnicity; • 7.93% are of black ethnicity • 3.68% are of Asian or Asian British ethnicity; • 0.63% are of Chinese ethnicity; • 0.58% are of Mixed ethnicity; and, • 1.06% did not specify or had another ethnicity. <p>Of consultation respondents who answered the appropriate question, the profile was:</p> <ul style="list-style-type: none"> • 96% were a white ethnic group; and, • 4% were another ethnic group. <p>In our consultation, respondents were invited to set out their views on the impact of the proposed fee rise through free text answers to questions 1-3.</p> <p>Whilst our data indicates the composition of the nursing and midwifery workforce, we do not have any data on the average earnings or work settings by race and whether any group would be adversely impacted by our proposal as a result.</p>

	<p>Consultation responses, MP letters received, parliamentary questions and the e-petition regarding the fee rise did not raise any issues in relation to a race impact from our proposal to increase the registration fee to £120.</p> <p>The proposed fee of £120 will apply equally across all registrants and there is no evidence to indicate any particular adverse impact on the protected characteristic of race.</p>
Religion/Belief	<p>Most registrants in the sample identify as Christian (72.12%) or as having no religion (20.43%).</p> <p>In our consultation 63% of those answering the relevant question identified as Christian, 31% had no religion and 6% as having another religious background or belief. In our consultation, respondents were invited to set out their views on the impact of the proposed fee rise through free text answers to questions 1-3.</p> <p>Consultation responses, MP letters received, parliamentary questions and the e-petition regarding the fee rise have not raised or presented any evidence of an adverse impact on the protected characteristic of religion or belief from our proposal to increase the registration fee to £120.</p> <p>The proposed fee of £120 will apply equally across all registrants and there is no evidence to indicate any particular adverse impact on the protected characteristic of religion or belief.</p>
Sexual Orientation	<p>Of the sample, 90.15% indicated they are heterosexual, 7.64% did not specify, 1.11% indicated they are homosexual and 1.10% indicated they are bisexual.</p> <p>In our consultation, 94% of those answering the relevant question indicated that they are heterosexual. In our consultation, respondents were invited to set out their views on the impact of the proposed fee rise through free text answers to questions 1-3.</p> <p>Consultation responses, MP letters received, parliamentary questions and the e-petition regarding the fee rise have not raised or presented any evidence of a sexual orientation impact from our proposal to increase the registration fee to £120.</p> <p>The proposed fee of £120 will apply equally across all registrants and there is no evidence to indicate any particular adverse impact on the protected characteristic of sexual orientation.</p>

Other Identified Groups	<p>The consultation will be available in Welsh, and may be requested in an audio format or other accessible formats such as large print.</p> <p>The Communication Plan includes contacting stakeholders for input to the consultation. These stakeholders include representative groups for protected characteristic such as Business Disability Forum, the African Health Policy Network, Gender Identity Research and Education Society and Stonewall.</p>
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How does the policy advance equality of opportunity?
N/A

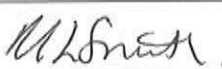
How does the policy promote good relations between different groups?
N/A

3. Summary of analysis

<p>Now you have considered the potential impacts on equality, what action are you taking? (Mark 'X' next to one option and give a reason for your decision)</p>		
<p>No change to the policy (no impacts identified)</p>	<p>Your analysis demonstrates that the policy is robust and the evidence shows no potential for discrimination. You have taken all appropriate steps to advance equality and foster good relations between groups.</p>	
<p>a. Continue the policy (impacts identified)</p>	<p>Continue with the proposal, despite any adverse impacts, provided it is not unlawfully discriminatory and is justified. Mitigation against any impacts also exists.</p>	<p>X</p>
<p>b. Adjust the policy and continue</p>	<p>Take steps to remove barriers, mitigate impacts or better advance equality before continuing with the policy.</p>	
<p>c. Stop and remove the policy</p>	<p>There are adverse effects that are not justified and cannot be mitigated. The policy is unlawfully discriminatory.</p>	
<p><u>Reason for decision:</u></p> <p>The Communication Plan includes contacting stakeholders for input to the consultation. These stakeholders include representative groups for protected characteristic such as Business Disability Forum, the African Health Policy Network, Gender Identity Research and Education Society and Stonewall.</p> <p>The current fee applies equally to all registrants, with no exceptions or reduced costs for any one group. The proposed increased fee will operate in the same manner. The NMC recognises that the increase in the fee will impact on registrants; amongst this the protected characteristics of gender, age and maternity/pregnancy status may be affected. However, having paid due regard to this, we believe that a fee rise is objectively justified and proportionate to achieve the legitimate aim of enabling us to protect the public by ensuring we have sufficient funding to achieve the statutory requirements placed upon us to the expected standards. Not to do so would have significant public protection implications as set out in our consultation document.</p> <p>The cost of regulation is determined by the activities we have a statutory duty to undertake as set out in our consultation document. If some registrants paid less, others would have to pay a significantly higher registration fee; we do not believe this is justifiable, nor proportionate when our current and proposed fee is the lowest (save for the HCPC) charged by the UK healthcare professionals regulators or their representation bodies for registration / membership.</p> <p>To mitigate any such impact we are proposing to introduce payment of the registration fee in instalments as soon as we are able to as we recognise that it will help to spread the cost of regulation to individuals to make payment more manageable. We have recently launched a consultation seeking to gain the legal ability to collect the registration fee in instalments here.</p>		

In addition, Nurses and midwives are able to claim tax relief on their registration fee through HM Revenue and Customs (HMRC). Our research suggests 50% of registrants are not aware of this so we have sought to promote this with them, and urged them to do so. A claim for tax relief would reduce the proposed fee to £96, and less for higher-rate taxpayers.

4. Action planning and sign off

Date of completion of EA	Draft equality assessment - May 2014 Revised equality assessment – August 2014
Compiled by	Policy & Legislation Team
Director sign off	
Review date	May 2016
I have read the EA guidance and I am satisfied that all the available evidence has been accurately analysed for its impact on equalities. The mitigations, where appropriate, have been identified and actioned.	

Please return an electronic copy to legislation.complianceTeam@nmc-uk.org. Once the document has been signed by the Director, it must be filed in the TRIM container 13/2528.

EA action plan

Review of NMC fee rise proposal – August 2014

Action or activity	Dependencies, risks and constraints	Completion date	Owner and interested stakeholder	Progress update
<p>Involvement and consultation</p> <ul style="list-style-type: none"> In our consultation, respondents were invited to set out their views on the impact of the proposed fee rise through free text answers to questions 1-3. 	Effective comms plan	In line with project plan	As per comms plan	Complete
<p>Data collection and evidencing</p> <ul style="list-style-type: none"> In our consultation, respondents were invited to set out their views on the impact of the proposed fee rise through free text answers to questions 1-3. 	Effective comms plan	In line with project plan	As per comms plan	Complete
<p>Analysis of evidence and assessment</p> <ul style="list-style-type: none"> Analysis of consultation responses will allow assessment of impact and, where necessary, amendments to final policy approaches. 	Availability of Alpha Research to analyse responses	In line with project plan	In line with project plan	Complete
<p>Monitoring, evaluating and reviewing</p> <ul style="list-style-type: none"> Continued assessment of information in voluntary and anonymous equality and diversity monitoring forms to inform the review of the EA for the proposed fee rise policy in May 2016. 	Effective response rates	Ongoing	E&D manager / Policy and Legislation Team	Review of EA for the proposed fee rise policy in May 2016.