

The Equality Team Welsh Government Cathay's Park Cardiff CF10 3NO

22 October 2021

By email only (LGBTQ+ActionPlan@gov.wales)

NMC response to the Welsh Government's consultation on the LGBTQ+ Action Plan for Wales

Thank you for the opportunity to respond to your LGBTQ+ Action Plan. This work reflects our vision for safe, effective and kind nursing and midwifery that improves everyone's health and wellbeing. As the professional regulator of nearly 732,000 nursing and midwifery professionals, we have an important role to play in making this a reality, alongside our partners.

Our commitment to equality

We value the diversity of the nursing and midwifery professionals on our register and strive to make sure that our processes are fair and accessible for everyone. There is no room for any kind of discrimination in the healthcare sector, and we're committed to working with partners to do everything in our power to tackle inequality and promote diversity and inclusion.

We strongly endorse the strategic vision outlined in the Action Plan, that "everyone has the right to be safe, to be themselves and to lead lives free from discrimination". We believe that a well-informed, compassionate and inclusive health and social care system can help people to achieve this ambition, both from the perspective of those working within the sector, and members of the public who use health and social care services.

Our equality, diversity and inclusion (EDI) <u>aims and values</u> play a core role in our wider corporate <u>strategy</u>. We are committed to working together with stakeholders at all levels to make our shared goals a reality, and we were pleased to recently respond to the Welsh Government's <u>Race Equality Action Plan</u> and to now see the Welsh Government bringing its LGBTQ+ Action Plan forward.

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Our views on the Action Plan

We are keenly aware of the unacceptable inequalities and barriers faced by some LGBTQ+ people in health and social care. Incorrect assumptions, bias and prejudice and harassment, as well as a lack of access to informed, tailored and inclusive health and care services, are some of the issues facing the LGBTQ+ communities. We believe that our role as a regulator requires us to work together with partners to break down barriers that stop anyone receiving the health and care they need, and as such we are supportive of the overall aims of your Action Plan.

We are particularly pleased to see people's lived experiences reflected in the strategy via the detailed <u>insight and recommendations</u> of the Independent LGBTQ+ Expert Panel, not least the clear recognition of the importance of intersectionality. We would encourage further steps to ensure that the Action Plan reflects the wide diversity of LGBTQ+ communities and the multiple disadvantage and barriers people with several protected characteristics may face. We are also supportive of the specific emphasis on the role of social care, where there are particular challenges for LGBTQ+ people. We feel that the Action Plan could benefit from being more closely aligned with the 2018 <u>Healthier Wales</u> policy on health and social care.

We are pleased to see plans to develop LGBTQ+ specific training. A recent paper from the House of Commons Women and Equalities Committee¹ indicated that current training in England does not tie gender or sexual orientation to the concept of personcentred care. Should a similar problem affect those training to practise in Wales, the Action Plan may have an opportunity to address it. Further to this, we would also hope to see emphasis on co-production applied to the development and evaluation of any specific LGBTQ+ training (whether this training exists already or is commissioned especially). In our view, all actions should be designed by and with the communities who will be impacted by them, and we support the co-productive practices the Welsh Government has undertaken so far.

Given the plethora of existing research and reports on specific disadvantages and barriers affecting LGBTQ+ people, we feel that an important step in the further development of the Action Plan could be to ensure all objectives are targeted, specific and measurable, have clear timeframes and outcomes, and are sufficiently broken down to create a set of specific practical actions. High level actions, for example Action 37 ("Continue to ensure that maternity and fertility services are accessible and straightforward to use for LGBTQ+ people") may need to be further articulated in different constituent parts in order to speak to the barriers which exist and support those, including the professionals on our register, working to achieve this goal.

The wider Action Plan would also benefit from the addition of a section broadly outlining how implementation will be monitored and held accountable, how people with lived experience might continue to be involved, and how this might feed back into policy making. The Action Plan states (in Action 6) that "We will formalise the Independent Expert Panel to guide, monitor and evaluate implementation of the plan. We will provide an annual progress update on the implementation of the plan." We would welcome further specific information within the Action Plan on how the Panel will be resourced, supported, and held to account, as well as the measures which will be used to ensure

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¹ Health and Social Care and LGBT Communities, House of Commons WEC, First Report of Session 2019 (HC 94)

that the Panel continues to be diverse and representative of the wider LGBTQ+ communities in Wales.

Our role as an inclusive regulator

Our <u>Code</u>, <u>standards</u> and <u>guidance</u> outline the professional requirements for nurses and midwives in Wales, and support your ambitions to improve the experiences of LGBTQ+ people accessing health and care. The Code introduces a range of requirements for professionals to take people's background and preferences into account, deliver care which is person-centred, listen to people's needs, and challenge discriminatory attitudes and behaviour relating to their care. They must also understand and pay attention to inequalities in health outcomes, and to work towards reducing them where they arise.

During the Covid-19 pandemic we have monitored our own role and performance in helping the health and social care sector to adapt and remain as safe as possible, and recently carried out an Equality Impact Assessment (EQIA) which considered LGBTQ+ communities and the potential and likely impacts on them (available at p36 here).

We keep our policy under continuous development. As part of this we are presently developing policy on conversion therapy, where there is clear evidence that the practice of these therapies can cause significant long-term harm to those who receive them. The professional work of nurses, midwives and nursing associates should not involve providing conversion therapies or encouraging people to undergo them. Doing so is against the standards set out in our Code and risks not only harm to the public, but also damaging public confidence in the profession by undermining the principle of promoting good standards in professional care. As such we are presently seeking to develop a clear definition of this practice in anticipation of it being raised with us as a regulatory concern.

Sharing our data and insight

Collecting, understanding and using data and intelligence is a key part of tackling disparities for people with protected characteristics. Our EDI work is always informed by the evidence available to us, and as a four nation regulator we endeavour to understand nuance and differences in the experiences of people across the different nations.

Earlier this year we published our latest data about the professionals on our register, including our <u>report</u> on professionals in Wales. Our data shows that the total number of nursing and midwifery professionals with permanent registration who have registered addresses in Wales grew 2 percent between April 2020 and March 2021, to 37,446 professionals. As of 31 March 2021, 179 of these professionals told us their gender identity did not match the sex they were assigned at birth. 929 preferred not to say and 118 do not have answers recorded. The remainder signified a gender identity that aligns with the sex they were assigned at birth.

Our available data for sexual orientation of professionals is as below/overleaf. Please note that our data relates to where professionals live rather than where they practice. As a result, our data includes a small number of Nursing Associates, who only practise in England.

Sexual Orientation of registrants with an address in Wales by Registration Type											
Registration Type	Sexual Orientation	As on 31st									
		March 2017		March 2018		March 2019		March 2020		March 2021	
		Number	%								
Midwife	Bisexual	5	0.4	4	0.3	2	0.1	7	0.4	16	0.9
	Gay or Lesbian	8	0.6	8	0.5	10	0.6	10	0.6	11	0.6
	Heterosexual or straight	1,130	79.6	1,372	89.7	1,516	95.1	1,575	94.7	1,642	94.0
	Prefer not to say	36	2.5	47	3.1	63	4.0	69	4.1	78	4.5
	Unknown	240	16.9	99	6.5	3	0.2	2	0.1		
	Sub total	1,419	100	1,530	100	1,594	100	1,663	100	1,747	100
Nurse	Bisexual	157	0.5	158	0.5	178	0.5	196	0.6	375	1.1
	Gay or Lesbian	419	1.3	485	1.4	533	1.6	582	1.7	656	1.9
	Heterosexual or straight	24,834	76.4	28,901	85.7	31,014	91.3	31,529	91.0	32,034	90.8
	Other									18	0.1
	Prefer not to say	1,800	5.5	2,004	5.9	2,139	6.3	2,191	6.3	2,104	6.0
	Unknown	5,311	16.3	2,168	6.4	93	0.3	163	0.5	87	0.2
	Sub total	32,521	100	33,716	100	33,957	100	34,661	100	35,274	100
Nurse & Midwife	Bisexual							1	0.2	1	0.2
	Gay or Lesbian	4	0.8	5	1.0	5	1.1	5	1.2	5	1.2
	Heterosexual or straight	407	78.6	415	86.6	413	92.2	403	92.9	394	94.0
	Prefer not to say	19	3.7	25	5.2	28	6.3	24	5.5	18	4.3
	Unknown	88	17.0	34	7.1	2	0.4	1	0.2	1	0.2
	Sub total	518	100	479	100	448	100	434	100	419	100
Nursing	Heterosexual or straight					1	50	4	80	6	100
Associate	Prefer not to say					1	50	1	20		
	Sub total					2	100	5	100	6	100
	Total	34,458		35,725		36,001		36,763		37,446	

Working collaboratively

We will continue to work closely with colleagues on Wales' unique health and care landscape, and are looking forward to working with the new Chief Nursing Officer for Wales, Sue Tranka, and the recently appointed Director of Nurse and Health Professional Education at Health Education and Improvement Wales, Lisa Llewelyn.

I hope this response has been useful. We look forward to seeing the outcome of your consultation and exploring further how we can collaborate and ensure that everyone, no matter their background, has the excellent experience they deserve when working for, or accessing, health and care in Wales and across the UK.

Yours sincerely,

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Chief Executive and Registrar

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