



Department
of Health

Rebalancing medicines
legislation and pharmacy
regulation:

Dispensing errors

Pharmacy Standards and
related matters

Equality Analysis

You may re-use the text of this document (not including logos) free of charge in any format or medium, under the terms of the Open Government Licence. To view this licence, visit www.nationalarchives.gov.uk/doc/open-government-licence/

© Crown copyright

Published to gov.uk, in PDF format only.

www.gov.uk/dh

Equality analysis

Title: Rebalancing medicines legislation and pharmacy regulation: dispensing errors and Pharmacy Standards and related matters

Relevant line in [DH Business Plan 2011-2015](#):

What are the intended outcomes of this work? *Include outline of objectives and function aims*

In respect of dispensing errors, the policy objective is to remove the fear of prosecution, where appropriate, from reporting dispensing errors. This is intended to promote increased reporting of errors to support patient safety initiatives. The objective in relation to Pharmacy Standards and related matters is to appropriately assure standards of pharmacies, while avoiding the imposition of additional and unnecessary costs for business and the regulators. The proposed rebalancing of medicines legislation and pharmacy regulation is designed to ensure the effectiveness of components of the system, which support patient safety, facilitate a quality-based systems approach to, and enable the development of, pharmacy practice.

The intended outcome of the work is to further improve safety for patients and users of pharmacy through:

- providing a defence to criminal sanction for inadvertent dispensing errors, leading to increased reporting and learning from errors, thus improving patient and public safety
- providing the pharmacy regulators with appropriate powers to set new standards and make changes relating to inspections, reports and enforcement powers relating to pharmacy premises.

Who will be affected? *e.g. staff, patients, service users etc.*

Patients and the public generally, especially those who have their medicines dispensed by community pharmacies, will benefit from the proposals in respect of dispensing errors as will pharmacy professionals and pharmacy staff. The proposals relating to pharmacy standards and other matters will primarily affect pharmacy contractors and owners but will ultimately benefit all users of pharmacy.

Evidence *The Government's commitment to transparency requires public bodies to be open about the information on which they base their decisions and the results. You must understand your responsibilities under the transparency agenda before completing this section of the assessment. For more information, see the current [DH Transparency Plan](#).*

What evidence have you considered? *List the main sources of data, research and other sources of evidence (including full references) reviewed to determine impact on each equality group (protected characteristic). This can include national research, surveys, reports, research interviews, focus groups, pilot activity evaluations etc. If there are gaps in evidence, state what you will do to close them in the Action Plan on the last page of this template.*

We have not been able to find any evidence on this area of work concerning the impact of this policy on the general equality duty. Accordingly, we are requesting those being consulted, to forward any evidence they may have of any differential impact.

Disability *Consider and detail (including the source of any evidence) on attitudinal, physical and social barriers.*

These proposals are designed to further improve safety for all users of pharmacy. They will benefit all those who receive medicines from community pharmacies regardless of ability. We are not aware of any differential impact these proposals will have specifically in relation to people who have disabilities. We will monitor whether the policy has such impact on people with disabilities, following implementation.

Sex *Consider and detail (including the source of any evidence) on men and women (potential to link to carers below).*

These proposals will benefit all those who receive medicines from a community pharmacy regardless of which sex they are. We are not aware of any impact these proposals will have specifically in relation to people of either sex. We will monitor whether the policy has differential impacts on people of either sex, following implementation.

Consultation – Rebalancing Medicines legislation and professional regulation Phase 1

Race Consider and detail (including the source of any evidence) on difference ethnic groups, nationalities, Roma gypsies, Irish travellers, language barriers.

These proposals will benefit all those who receive medicines from a community pharmacy regardless of their racial backgrounds. We are not aware of any differential impact these proposals will have specifically in relation to race. We will monitor whether the policy has differential impacts on people of different ethnic minority backgrounds, following implementation.

Age Consider and detail (including the source of any evidence) across age ranges on old and younger people. This can include safeguarding, consent and child welfare.

These proposals will benefit all those who receive medicines from a community pharmacy regardless of their age. We are not aware of any differential impact these proposals will have specifically in relation to age. However, we will monitor whether the policy has differential impacts on people of different ages, following implementation.

Gender reassignment (including transgender) Consider and detail (including the source of any evidence) on transgender and transsexual people. This can include issues such as privacy of data and harassment.

These proposals will benefit all those who receive medicines from a community pharmacy regardless of their gender. We are not aware of any differential impact these proposals will have specifically in relation to gender reassignment. However, we will monitor whether the policy has differential impacts on people of different genders, following implementation.

Sexual orientation Consider and detail (including the source of any evidence) on heterosexual people as well as lesbian, gay and bi-sexual people.

These proposals will benefit all those who receive medicines from a community pharmacy regardless of their sexual orientation. We are not aware of any differential impact these proposals will have specifically in relation to sexual orientation. We will monitor whether the policy has differential impacts on people of different genders, following implementation.

Religion or belief Consider and detail (including the source of any evidence) on people with different religions, beliefs or no belief.

These proposals will benefit all those who receive medicines from a community pharmacy regardless of their religion or belief. We are not aware of any differential impact these proposals will have specifically in relation to religion or belief. We will monitor whether the policy has differential impacts on people of different religions or beliefs, following implementation.

Pregnancy and maternity Consider and detail (including the source of any evidence) on working arrangements, part-time working, infant caring responsibilities.

We are not aware of any issues or concerns arising in relation to pregnancy or maternity. We will monitor whether the policy has an impact on pregnant women and those on maternity leave, following implementation.

Carers Consider and detail (including the source of any evidence) on part-time working, shift-patterns, general caring responsibilities.

These proposals will benefit all those who receive medicines from the pharmacy, whether directly or on someone's behalf. However, we welcome information or feedback from carers as part of the public consultation, on whether they can identify any differential impacts. We will monitor whether the policy differentially impacts carers and the people they care for, following implementation.

Other identified groups Consider and detail and include the source of any evidence on different socio-economic groups, area inequality, income, resident status (migrants) and other groups experiencing disadvantage and barriers to access.

No other groups have been identified.

Engagement and involvement

Was this work subject to the requirements of the cross-government [Code of Practice on Consultation](#)? (Y/N)

How have you engaged stakeholders in gathering evidence or testing the evidence available?

We are consulting on these proposals and asking for comments on this Equality Analysis.

How have you engaged stakeholders in testing the policy or programme proposals?

Through the public consultation and planned events for patients and the public.

For each engagement activity, please state who was involved, how and when they were engaged, and the key outputs:

Events for patients and the public, across all four countries, are advertised as part of the suite of consultation documents. The public are invited to sign up on a 'self-select' basis. The aim of the events is to promote understanding and provide information with opportunities for discussion and clarification, on the proposals under consultation.

Summary of Analysis *Considering the evidence and engagement activity you listed above, please summarise the impact of your work. Consider whether the evidence shows potential for differential impact, if so state whether adverse or positive and for which groups. How you will mitigate any negative impacts. How you will include certain protected groups in services or expand their participation in public life.*

Now consider and detail below how the proposals impact on elimination of discrimination, harassment and victimisation, advance the equality of opportunity and promote good relations between groups.

Eliminate discrimination, harassment and victimisation *Where there is evidence, address each protected characteristic (age, disability, gender, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation).*

We believe these proposals will support the elimination of discrimination, harassment and victimisation.

Advance equality of opportunity *Where there is evidence, address each protected characteristic (age, disability, gender, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation).*

We believe this policy will support the advancement of equality of opportunity.

Promote good relations between groups *Where there is evidence, address each protected characteristic (age, disability, gender, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation).*

We believe this policy will support the promotion of good relations between groups.

What is the overall impact? *Consider whether there are different levels of access experienced, needs or experiences, whether there are barriers to engagement, are there regional variations and what is the combined impact?*

We have not identified any factors arising from these proposals, which impact on matters of equality, create barriers or introduce regional variation. We will monitor with key stakeholders the effects of this policy to ensure this remains the case.

Addressing the impact on equalities *Please give an outline of what broad action you or any other bodies are taking to address any inequalities identified through the evidence.*

No negative impacts have been identified.

Action planning for improvement *Please give an outline of the key actions based on any gaps, challenges and opportunities you have identified. Actions to improve the policy/programmes need to be summarised (An action plan template is appended for specific action planning). Include here any general action to address specific equality issues and data gaps that need to be addressed through consultation or further research.*

This equality analysis will be published alongside the planned consultation on the proposals.

Please give an outline of your next steps based on the challenges and opportunities you have identified. *Include here any or all of the following, based on your assessment*

- Plans already under way or in development to address the **challenges** and **priorities** identified.
- Arrangements for continued engagement of stakeholders.
- Arrangements for continued monitoring and evaluating the policy for its impact on different groups as the policy is implemented (or pilot activity progresses)
- Arrangements for embedding findings of the assessment within the wider system, OGDs, other agencies, local service providers and regulatory bodies
- Arrangements for publishing the assessment and ensuring relevant colleagues are informed of the results
- Arrangements for making information accessible to staff, patients, service users and the public
- Arrangements to make sure the assessment contributes to reviews of DH strategic equality objectives.

This Equality Analysis does not suggest action is required at this stage to improve the proposals or to address specific equality issues. We will keep this under review and in the light of responses received to the planned consultation.

For the record

Name of person who carried out this assessment:

Gillian Farnfield

Date assessment completed:

March 2015

Name of responsible Director/Director General:

Liz Woodeson

Date assessment was signed:

? 2014

Action plan template

Category	Actions	Target date	Person responsible and their Directorate
Involvement and consultation	Consult on proposals		Theresa Prendergast, MPI
Data collection and evidencing	Collate responses to consultation		Theresa Prendergast, MPI
Analysis of evidence and assessment	Analyse responses to consultation		Theresa Prendergast, MPI
Monitoring, evaluating and reviewing	?		
Transparency (including publication)	Publish final Equality Analysis alongside final Impact Assessment and relevant legislation		Theresa Prendergast, MPI