



Implementing the Health Act 2006: fees for NHS pharmaceutical services

Equality Analysis

July 2012

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Prepared by: Medicines, Pharmacy and Industry – Pharmacy Team in conjunction with the Advisory Group on the NHS (Pharmaceutical Services) Regulations

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Title: Implementing the Health Act 2006: Fees for NHS pharmaceutical services

Relevant line in DH Corporate Plan 2012-2015: Better Value – providing better quality care by improving productivity and ensuring value for money for the taxpayer

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

The policy objective is to help defray NHS costs for applications for NHS pharmaceutical services under the NHS (Pharmaceutical Services) Regulations 2012 and discourages speculative or “blocking” applications which can reduce competition and entry.

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

Existing and potential pharmacy contractors, dispensing appliance contractors and their staff who provide NHS pharmaceutical services.

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.*

Sources of evidence:

General Pharmaceutical Council's Equality Scheme published in 2010 –

<http://www.pharmacyregulation.org/pdfs/other/gphcequalityanddiversityscheme.pdf>

Primary Care Trust websites

General Pharmaceutical Services in England 2001-02 to 2010-11 – <http://www.ic.nhs.uk/statistics-and-data-collections/primary-care/pharmacies/general-pharmaceutical-services-in-england-2001-02-to-2010-11>

The General Pharmaceutical Council's *guidance on the provision of pharmacy services affected by religious and moral beliefs* -

<http://www.pharmacyregulation.org/pdfs/other/religiousmoralbeliefguidancev13.pdf>

Consideration of evidence - general

Access to NHS pharmaceutical services, advice and supply of medicines and health consumables is an integral part of primary care in the NHS and, as such, should be available on an equitable basis to all people in England. PCTs are required as a public body to act in accordance with the public sector equality duty and all have equality and diversity policies (sample of PCT websites reviewed).

The fees to be levied for applications will apply to any applicant.

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

All contractors providing NHS pharmaceutical services have an existing and ongoing responsibility under the Equality Act 2010 to make reasonable adjustments to their services and provide auxiliary aids where appropriate for people with disabilities.

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

The General Pharmaceutical Council (GPhC) in its *Equality Scheme* report on the number of pharmacists and pharmacy technicians on the GPhC 2010 register that 50% of registrants are female and 49% male. However, amongst registered pharmacists, 57% are female and 42% male.

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

The GPhC in its *Equality Scheme* report on the number of pharmacists and pharmacy technicians on the GPhC's 2010 register that 23% of pharmacists are from black and ethnic minority backgrounds compared with 8% for the general population as a whole (drawing on 2001 Population and Census data) – this breaks down as 63% White, 17% Asian, 3% Black, just under 3% Chinese origin and 10% of registrants were recorded as “ethnic origin unknown”.

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.

The GPhC in its *Equality Scheme* report on the number of pharmacists and pharmacy technicians on the GPhC's 2010 register that almost half of the pharmacists on the Register are aged under 40 years. Female pharmacists are younger than males – 55.2% are aged less than 40 years, compared with 40.47% of males.

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.

The GPhC in its *Equality Scheme* states the ‘general duty to promote equality between women and men and to eliminate unlawful discrimination and harassment on the grounds of gender, gender reassignment or sexual orientation when carrying out functions’.

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

The GPhC in its *Equality Scheme* states the 'general duty to promote equality between women and men and to eliminate unlawful discrimination and harassment on the grounds of gender, gender reassignment or sexual orientation when carrying out functions'.

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

None

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

None

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

None

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.

None

Engagement and involvement

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

How have you engaged stakeholders in gathering evidence or testing the evidence available/ How have you engaged stakeholders in testing the policy or programme proposals?

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

This policy proposal was consulted on three times between 2005 and 2010 and consultees were asked to comment on the then equality impact assessment. No comments were received.

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 this policy 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 this policy which impact on equality. We will monitor with PCTs 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 Fees for Applications Directions 2012 and the new NHS (Pharmaceutical Services) Regulations 2012.

For the record

Name of person who carried out this assessment:

Catriona Patterson

Date assessment completed:

July 2012

Name of responsible Director/Director General:

Giles Denham

Date assessment was signed:

July 2012

Action plan template

This part of the template is to help you develop your action plan. You might want to change the categories in the first column to reflect the actions needed for your policy.

Category	Actions	Target date	Person responsible and their Directorate
Involvement and consultation	See above		
Data collection and evidencing	Continue to monitor impact of proposals using existing data collections and other relevant evidence.	ongoing	Catriona Patterson
Analysis of evidence and assessment	Analyse any gaps which become apparent during monitoring.	ongoing	Catriona Patterson
Monitoring, evaluating and reviewing			Catriona Patterson
Transparency (including publication)	Publish equality analysis	June 2012	Catriona Patterson