

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE guidelines

Equality impact assessment

Community pharmacy: promoting health and wellbeing

The impact on equality has been assessed during guidance development according to the principles of the NICE equality policy.

1.0 Scope: before consultation (to be completed by the Developer and submitted with the draft scope for consultation)

1.1 Have any potential equality issues been identified during the development of the draft scope, before consultation, and, if so, what are they?

(Please specify if the issue has been highlighted by a stakeholder)

The proposed scope does not explicitly exclude any groups of people. The proposed scope only excludes services provided by hospital pharmacies that are dispensing for inpatients or outpatients, services that people use because they were directed to those services by pharmacy staff, and online pharmacies.

The proposed focus of the guideline is all members of a community that a community pharmacy serves. This will include people who are well, people at risk of health conditions, and people with health conditions. People may be at risk of health conditions because of behavioural risk factors (such as smoking, misusing alcohol or drugs, or being physically inactive), physiological or biochemical risk factors (such as high blood pressure or being overweight) or risk factors that may affect their mental health (such as difficulties sleeping).

The proposed scope includes any setting where community pharmacy services are provided by community pharmacists or their staff. This will include services offered to people who may have difficulty accessing other healthcare services, such as people who are housebound, and people who do not want to access other healthcare services, such as people who do not present to their GP.

The proposed key areas that will be covered are general health and wellbeing advice for all people in contact with community pharmacy staff, including tailored health and wellbeing promoting activities for groups at risk of health conditions and people with

health conditions.

Potential equality issues were discussed at the stakeholder workshop. Attendees at the workshop highlighted the following considerations:

- Some groups, such as travellers, may be more likely to present to a community pharmacy than a GP. Some groups may be less likely to present to any primary care service, such as:
 - People who are housebound
 - People in care homes or sheltered accommodation
 - Carers
 - Men
 - People from BME groups
 - People who are homeless
 - People who misuse drugs or alcohol
 - Other disadvantaged or underserved groups
- It may be difficult to identify people at risk of particular health conditions or with a particular health condition, for example, people with mental health problems.
- Some groups may have difficulty understanding information provided by community pharmacy services, such as those who do not speak English as a first language and people who are unable to read.

The attendees at the workshop also highlighted that community pharmacy can play an important role in reducing health inequalities, as people who do not access healthcare through other routes may seek healthcare advice in a pharmacy setting.

1.2 What is the preliminary view on the extent to which these potential equality issues need addressing by the Committee? For example, if population groups, treatments or settings are excluded from the scope, are these exclusions justified – that is, are the reasons legitimate and the exclusion proportionate?

The preliminary view is that these potential equality issues will not need addressing by the committee.

Completed by Developer Ella Novakovic

Date 6th June 2016

Approved by NICE quality assurance lead Andrew Harding

Date 6th June 2016

2.0 Scope: after consultation (to be completed by the Developer and submitted with the revised scope)

2.1 Have any potential equality issues been identified during consultation, and, if so, what are they?

During consultation, stakeholders identified the following equality issues:

- How looked after children's health needs are assessed and addressed.
- Providing interventions in a language that users of community pharmacies can understand, particularly in areas where people do not speak English as a first language.
- Providing information in a format that is appropriate for people's needs and cultural background.
- Providing interventions that are appropriate for the complexity of the information being provided.

Stakeholders also asked for clarification to be added to the equality impact assessment on why distance-selling (online) pharmacies are excluded from the scope. This decision was made taking into account all comments received from stakeholders. It was decided that whilst distance-selling pharmacies can play a role in promoting health and wellbeing, they do not have the same opportunity to provide face to face care as 'bricks and mortar' community pharmacies.

After consultation, an additional potential equality issue was identified: access to community pharmacy services in rural areas. In rural communities where there is no reasonable access to a community pharmacy, GPs are able to provide dispensing services. However, in areas where GPs provide dispensing services, it is difficult for new community pharmacies to open as they are not allowed to 'prejudice' existing medical or pharmaceutical services (see <http://psnc.org.uk/contract-it/market-entry-regulations/rural-issues/> for more information). As a result, it may be difficult for people in rural communities to access community pharmacy services.

2.2 Have any changes to the scope been made as a result of consultation to highlight potential equality issues?

No changes to the scope have been made as a result of consultation to highlight potential equality issues. The guideline committee will be provided with the equality impact assessment and be asked to consider equality issues throughout the development of the guideline. This consideration will be based on the evidence available, as equalities issues will be highlighted and extracted where possible/available, and from their expert perspective and experiences.

2.3 Is the primary focus of the guideline a population with a specific disability-related communication need?

If so, is an alternative version of the 'information for the public' recommended?

If so, which alternative version is recommended?

The alternative versions available are:

- large font or audio versions for a population with sight loss
- British Sign Language videos for a population deaf from birth
- 'Easy read' versions for people with learning disabilities or cognitive impairment.

The guideline does not focus on a population with a specific disability-related communication need.

Updated by Developer Ella Novakovic

Date 5th September 2016

Approved by NICE quality assurance lead Jenny Mills

Date 9th September 2016