



## Equality, Good Relations and Human Rights SCREENING TEMPLATE

See [Guidance Notes](#) for further information on the 'why' 'what' 'when', and 'who' in relation screening, for background information on the relevant legislation and for help in answering the questions on this template (follow the links).

### (1) INFORMATION ABOUT THE POLICY OR DECISION

#### 1.1 Title of policy or decision

Revision of the special advance arrangements within Pharmaceutical Practices

#### 1.2 Description of policy or decision

##### **Aims**

1. A reduction to the time required to make payments to contractors.
2. Improved adherence to "prompt payment" policy
3. More responsive information on this element of the HSC budget
4. A reduction in resources tied into the SA payment
5. A SA which is more reflective of overall community pharmacy business

##### **How will this be achieved**

The current payment process facilitates a 60 day payment schedule and a SA is provided in recognition of this 60 day cycle. Given the duration of the current cycle, business processes have been reviewed and the BSO has advised the HSCB that the payment schedule can be reduced to 45 days.

The methodology to calculate the current SA is not consistent with other parts of the UK (or indeed the Republic of Ireland). The methodology used in NI is based on ingredient cost of drugs dispensed and does not currently include fees paid to community pharmacists.

It is proposed to move to a rolling advance method similar to that used by England which reflects not only the ingredient cost of drugs dispensed but

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includes the fees paid to community pharmacists.

### **Constraints**

- Capacity within BSO to effect the change in payment schedule
- Perceptions that the proposed changes will affect cash flow

### **1.3 Main stakeholders affected (internal and external)**

**For example staff, actual or potential service users, other public sector organisations, voluntary and community groups, trade unions or professional organisations or private sector organisations or others**

- Community Pharmacy Contractors
- Pharmacy Contractors Committee
- Business Services Organisation
- Health and Social Care Board
- Department of Health, Social Services and Public Safety

### **1.4 Other policies or decisions with a bearing on this policy or decision**

- Establishment of new Community Pharmacy Contract – the Business Services Organisation and the Health and Social Care Board have been given a Ministerial mandate to negotiate with the Pharmacy Contractors Committee
- Policy for prompt payment

(2) **CONSIDERATION OF EQUALITY AND GOOD RELATIONS ISSUES AND EVIDENCE USED**

**2.1 Data Gathering**

What information did you use to inform this equality screening? For example previous consultations, statistics, research, Equality Impact Assessments (EQIAs), complaints. Provide details of how you involved stakeholders, views of colleagues, service users, staff side or other stakeholders.

Review of Pharmaceutical Society Register

Pharmacy Workforce Review 2005

**2.2 Quantitative Data**

Who is affected by the policy or decision? Please provide a statistical profile. Note if policy affects both staff and service users, please provide profile for both.

| <b>Category</b>   | <b><i>What is the makeup of the affected group? ( %) Are there any issue or problems? For example, a lower uptake that needs to be addressed or greater involvement of a particular group?</i></b> |
|-------------------|--|
| Gender            | Workforce - 54% Female; 46% Male   |
| Age               | Age profile of the affected group cannot be readily identified,  |
| Religion          | The religion of the affected group cannot be readily identified,   |
| Political Opinion | The political opinion of the affected group cannot be readily identified,.   |
| Marital Status    | The marital status of the affected group cannot be readily identified,   |
| Dependent Status  | The dependent status of the affected group cannot be readily identified  |
| Disability        | There is no information available in respect of the profile of the affected group in respect of disability ,   |
| Ethnicity         | There is no information in respect of the profile of ethnicity of the  |

|                    |  |
|--------------------|--|
|                    | affected group   |
| Sexual Orientation | There is no information in respect of the profile of ethnicity of the affected group |

### 2.3 Qualitative Data

**What are the different needs, experiences and priorities of each of the categories in relation to this policy or decision and what equality issues emerge from this? Note if policy affects both staff and service users, please discuss issues for both.**

| <i>Category</i>    | <i>Needs and Experiences</i> |
|--------------------|------------------------------|
| Gender             | None                         |
| Age                | None                         |
| Religion           | None                         |
| Political Opinion  | None                         |
| Marital Status     | None                         |
| Dependent Status   | None                         |
| Disability         | None                         |
| Ethnicity          | None                         |
| Sexual Orientation | None                         |

### 2.4 Multiple Identities

**Are there any potential impacts of the policy or decision on people with multiple identities? For example; disabled minority ethnic people; disabled women; young Protestant men; and young lesbians, gay and bisexual people.**

|  |
|--|
| There is no information available to identify the potential impact on people with multiple identities. |
|--|

**2.5 Based on the equality issues you identified in 2.2 and 2.3, what changes did you make or do you intend to make in relation to the policy or decision in order to promote equality of opportunity?**

| <i><b>In developing the policy or decision what did you do or change to address the equality issues you identified?</b></i> | <i><b>What do you intend to do in future to address the equality issues you identified?</b></i> |
|---|---|
| There are no perceived equality issues arising from the proposed policy change  |   |

**2.6 Good Relations**

**What changes to the policy or decision – if any – or what additional measures would you suggest to ensure that it promotes good relations? (refer to guidance notes for guidance on impact)**

| <i><b>Group</b></i> | <i><b>Impact</b></i> | <i><b>Suggestions</b></i> |
|---------------------|----------------------|---------------------------|
| Religion            | No further impact    | No suggestions            |
| Political Opinion   | No further impact    | No suggestions            |
| Ethnicity           | No further impact    | No suggestions            |

**(3) SHOULD THE POLICY OR DECISION BE SUBJECT TO A FULL EQUALITY IMPACT ASSESSMENT?**

A full equality impact assessment (EQIA) is usually confined to those policies or decisions considered to have major implications for equality of opportunity.

**How would you categorise the impacts of this decision or policy? (refer to guidance notes for guidance on impact)**

**Do you consider that this policy or decision needs to be subjected to a full equality impact assessment?**

**Please tick:**

|                   |                                     |
|-------------------|-------------------------------------|
| Major impact      | <input type="checkbox"/>            |
| Minor impact      | <input type="checkbox"/>            |
| No further impact | <input checked="" type="checkbox"/> |

**Please tick:**

|     |                                     |
|-----|-------------------------------------|
| Yes | <input type="checkbox"/>            |
| No  | <input checked="" type="checkbox"/> |

Please give reasons for your decisions.

The revised special advance arrangements seek to improve the current system while at the same time release scarce resources to support other areas of the health system

**(4) CONSIDERATION OF DISABILITY DUTIES**

**4.1 In what ways does the policy or decision encourage disabled people to participate in public life and what else could you do to do so?**

| <b><i>How does the policy or decision currently encourage disabled people to participate in public life?</i></b>  | <b><i>What else could you do to encourage disabled people to participate in public life?</i></b> |
|---|--|
| The benefits to the Health system will mean that scarce resources are used more efficiently which could have a positive impact on other elements of the service |  |

**4.2 In what ways does the policy or decision promote positive attitudes towards disabled people and what else could you do to do so?**

| <b><i>How does the policy or decision currently promote positive attitudes towards disabled people?</i></b> | <b><i>What else could you do to promote positive attitudes towards disabled people?</i></b> |
|---|---|
| Not applicable  |   |

## (5) CONSIDERATION OF HUMAN RIGHTS

### 5.1 Does the policy or decision affect anyone's Human Rights? Complete for each of the articles

| ARTICLE  | Yes/No |
|--|--------|
| Article 2 – Right to life  | No     |
| Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment                    | No     |
| Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour                         | No     |
| Article 5 – Right to liberty & security of person  | No     |
| Article 6 – Right to a fair & public trial within a reasonable time  | No     |
| Article 7 – Right to freedom from retrospective criminal law & no punishment without law                   | No     |
| Article 8 – Right to respect for private & family life, home and correspondence.                           | No     |
| Article 9 – Right to freedom of thought, conscience & religion   | No     |
| Article 10 – Right to freedom of expression  | No     |
| Article 11 – Right to freedom of assembly & association  | No     |
| Article 12 – Right to marry & found a family   | No     |
| Article 14 – Prohibition of discrimination in the enjoyment of the convention rights                       | No     |
| 1 <sup>st</sup> protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property | No     |
| 1 <sup>st</sup> protocol Article 2 – Right of access to education  | No     |

*If you have answered no to all of the above please move onto to move on to **Question 6** on monitoring*

**5.2 If you have answered yes to any of the Articles in 5.1, does the policy or decision interfere with any of these rights? If so, what is the interference and who does it impact upon?**

| List the Article Number | Interfered with? Yes/No | What is the interference and who does it impact upon? | Is it legal?* Yes/No |
|-------------------------|-------------------------|---|----------------------|
|                         |                         |   |                      |

*\* It is important to speak to your line manager on this and if necessary seek legal opinion to clarify this*

**5.3 Outline any actions which could be taken to promote or raise awareness of human rights or to ensure compliance with the legislation in relation to the policy or decision.**

|  |
|--|
|  |
|--|

(6) **MONITORING**

6.1 What data will you collect in the future in order to monitor the effect of the policy or decision on any of the categories (for equality of opportunity and good relations, disability duties and human rights?)

| Equality & Good Relations | Disability Duties | Human Rights |
|---------------------------|-------------------|--------------|
| None.                     | None.             | None.        |

Approved Lead Officer: Joe Brogan

Position: Asst Dir Integrated Care

Date: 25<sup>th</sup> November 2010

Policy/Decision Screened by: Joe Brogan/Kathryn Turner

**Please note that having completed the screening you will need to ensure that a consultation on the outcome of screening is undertaken, in line with Equality Commission guidance.**

**Please forward completed schedule to: Anne McGlade, Equality Manager, Business Services Organisation  
Email: [anne.mcglade@hscni.net](mailto:anne.mcglade@hscni.net)  
Telephone 028 90535577**

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