

Equality Impact Assessments Toolkit

EqlA Template



You must consider the [Equality Impact Assessment Guidance](#) when completing this template.

The EDI team can provide help and advice on undertaking an EqIA and also provide overview quality assurance checks on completed EqIA documents.

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| Quality Control | |
|--|---|
| Title of proposal | Sandwell Pharmaceutical Needs Assessment 2025 |
| Directorate and Service Area | Public Health |
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| Date EqIA completed | 11/07/2025 |
| Date EqIA signed off or agreed by Director or Executive Director | |
| Name of Director or Executive Director signing off EqIA | |
| Date EqIA considered by Cabinet | |
| Where the EqIA is Published (please include a link to the EqIA and send a copy of the final EqIA to the EDI team) | |

Section 1.

The purpose of the project, proposal or decision required

2.1. The Pharmaceutical Needs Assessment (PNA) is a statutory document, assessing the current pharmaceutical provision, in the context of the needs of the local population. The PNA identifies gaps in service provision and informs the commissioning of pharmaceutical services based on local priorities. NHS England (NHSE) primarily uses the PNA to support the assessment of applications to open new pharmacies (referred to as the 'Market Entry Test').

2.2. The aim of the PNA is to assist Sandwell Metropolitan Borough Council (MBC), Sandwell Health and Wellbeing Board (HWBB), Black Country Integrated Care Board (ICB), Community Pharmacy Black Country (formerly known as Local Pharmaceutical Committee), pharmacy contractors, NHSE, and other key stakeholders to:

- Understand the current and future pharmaceutical needs for the population of Sandwell
- Understand the current provision of pharmaceutical services
- Identify and address gaps in pharmaceutical services
- Inform commissioning decisions for pharmaceutical services by local authorities, NHSE, and Black Country ICB
- Inform decisions regarding the award of new NHS pharmacy contracts

2.3. The PNA produces a set of recommendations to optimise the provision of pharmaceutical services to meet the needs of the local Sandwell population, and to support NHSEs' assessment to open new pharmacies ('Market Entry Test').

2.4. There is a statutory requirement for the PNA to be updated every three years.

2.5. The PNA draws upon information from Sandwell Joint Strategic Needs Assessments (JSNAs) but does not replicate the detailed descriptions on health needs provided by JSNAs, therefore it is advised to be read alongside JSNAs. The findings and recommendations presented in the PNA will also support The Sandwell Council Plan 2024-2027 and Ambition 2 of Sandwell's Vision 2030 ("Sandwell is a place where we live health lives and live them for longer"), by ensuring the whole population has access to the pharmaceutical services they need.

2.6. As above, the PNA will support Ambition 2 of Sandwell's Vision 2030, by ensuring the whole population of Sandwell has equitable access to pharmaceutical services. Targeted engagement with groups that were underrepresented in the

residents' survey will form part of the formal consultation period. This will be facilitated by voluntary organisations, through a variety of formats, to capture a diverse range of views. This will ensure that the conclusions and recommendations of the report are truly representative of the Sandwell population as we strive for equitable pharmaceutical provision in the borough.

2.7. There is a multi-disciplinary steering group, involving representatives from Sandwell MBC Public Health, Black Country ICB, Healthwatch, and Community Pharmacy Black Country.

Section 2.

Evidence used and considered. Include analysis of any missing data

3.1. Various sources of evidence were used:

Chapter 2: evidence from Sandwell Joint Strategic Needs Assessments (primary sources including- Office for National Statistics (ONS), and Office for Health Improvement and Disparities (OHID)).

Chapter 3: as above, SHAPE Atlas, NHS Office of West Midlands

Chapter 4: contractors' survey, service activity/sign-up data from NHS Business Services Authority (NHSBSA (via NHS Office of the West Midlands- hosted by Birmingham and Solihull ICB) and NHSBSA (via Pharmaceutical Services Negotiating Committee services dashboard).

Chapter 5: residents' survey

3.2. Up-to-date information and data:

Chapter 2: mid-year population estimates, age profile, population growth projections, housing growth, ethnicity, life expectancy, deprivation, admission episodes for alcohol related conditions, alcohol related mortality rates, physical activity, obesity, teenage conceptions, disease prevalence

Chapter 3: geographical distribution of pharmacies, pharmacy opening hours

Chapter 4: pharmacy accessibility and facilities, contractor reported service provision, supplemented with service activity and sign-ups.

Chapter 5: residents' survey respondents' demographics, reported use and views on location, opening hours of pharmacies, facilities and accessibility, residents' reported awareness and use of services

3.3. As above, census data, monitoring data, residents' and contractors' surveys, consultation surveys for public and professionals.

3.4. Demographics of the population of Sandwell are outlined in Chapter 2, supplemented with information from scientific literature on specific health needs

of subgroups of the population. Service activity data however is not available down to the level of protected characteristics.

3.5. The initial stage of the PNA included consultation with the public to collect information of their use of pharmacies and views on accessibility and facilities of pharmacies. The demographics of the respondents was not representative of the diverse population of Sandwell. The following groups were underrepresented in the residents' survey:

- Young people (2% under 25 years old)
- Males (24.2%)
- Ethnic minority groups (15.4%)
- LGBTQ+ groups (6.9%)
- Full time parents (2.1%)
- Carers (2.9%)

Therefore, there is a potential gap in the evidence on whether the pharmaceutical services in Sandwell are meeting the needs of the groups above. This has implications on whether the conclusions and recommendations are representative of the wider population of Sandwell. We aim to address this through use of targeted engagement in the formal consultation process to ensure that the voices of groups underrepresented in the residents' survey are heard.

Section 3.

Consultation

4.1. There has been initial consultation early in the PNA process, with residents of Sandwell and pharmacy contractors in Sandwell. Once the pre-consultation draft is completed and approved by HWBB there will be a consultation with the public and professionals to agree upon conclusions and recommendations drawn from the initial consultation and supplementary data.

4.2. Initial consultation with public and contractors was through use of surveys- these were mainly online, with an option of paper if required. The residents' survey was translated into: Bengali, Panjabi, and Polish, and Urdu. Formal consultation will also use online survey format, and targeted engagement with groups underrepresented in respondents' demographics. This will take the format of focus groups and assisted completion of questionnaires facilitated by voluntary organisations.

4.3. Once the pre-consultation draft is completed and approved by HWBB, the pre-consultation draft will go out for a formal sixty-day consultation period to ensure public and professionals are in agreement with conclusions and

recommendations prior to implementation. This will include targeted engagement with underrepresented groups in the community.

4.4. Conclusions:

- Most people can get to a pharmacy within 20 minutes on public transport or 15 minutes walking, so there are enough pharmacies in the right locations, to meet the current and future needs of people living in Sandwell.
- Every town in Sandwell has a pharmacy open early, late, and on weekends. Despite this, there is still a demand for more pharmacies to be open on weekends.
- Pharmacies can offer a range of different services, but many people do not know which services their local pharmacy provides.
- There are enough pharmacies across Sandwell offering the following services: Flu Vaccination, Hypertension Case-Finding Service, New Medicines Service, Lateral Flow Device Service, and Pharmacy First Service.
- Not many people use Stop Smoking Services, Stoma Appliance Customisation Service, and Appliance Use Review Service from community pharmacies in Sandwell. This is likely because people typically access these services from elsewhere (e.g. a specialist service delivered by a community provider for Stop Smoking Service, and Dispensing Appliance Contractors for SAC and AUR).
- Many pharmacies have wheelchair access (86.8%), but not many have hearing loops (30%) to support people with people with impaired hearing or are deaf. Many people responding to the survey were not sure about what support is available in pharmacies to help people with disabilities.

The diversity of demographics of respondents remains to be low and not representative of the Sandwell population. The following groups were underrepresented in the residents' survey:

- Young people (2% under 25 years old)
- Males (24.2%)
- Ethnic minority groups (15.4%)
- LGBTQ+ groups (6.9%)
- Full time parents (2.1%)
- Carers (2.9%)

4.5. Recommendations:

- Services provided by pharmacies should be widely promoted by pharmacies and other healthcare services. This could be through use of posters, leaflets, and video advertisements that are easily accessible to patients.

- More pharmacies should offer the “morning after pill” free of charge, especially in Tipton and Rowley Regis.

- Pharmacies should be easily accessible to all:

Future Sandwell PNAs should:

a) Include local residents in the group working on the PNA.

b) Consider alternative methods of engagement at the initial consultation stage to ensure that we capture diverse views at an earlier stage of the process.

c) Use datasets to obtain information on service sign-up and service activity, and contractors’ survey for information on willingness to sign-up. This would help to avoid discrepancies between contractor surveys and datasets and shorten the contractor survey.

The demographic data collected in the residents’ survey has helped us to identify groups that have been underrepresented in this consultation process. This has enabled us to modify the formal consultation process to include targeted engagement. This aims to ensure that the conclusions and recommendations are representative of the wider Sandwell population views.

4.6. Future consultation- formal 60-day consultation period as per above. This will include targeted engagement with groups underrepresented in the residents’ survey. The consultation will primarily be via two online surveys- one for professionals, and another for the public. Targeted engagement will be facilitated by voluntary organisations and may take various formats such as focus groups or assisted completion of questionnaires.

Section 4.

Summary assessment of the analysis at section 4a and the likely impact on each of the protected characteristics (if any)

In summary, the PNA will not have negative, or discriminatory, impacts on people with certain protected characteristics. Furthermore, many recommendations are likely to have a positive impact on inclusion and promoting equitable access to pharmaceutical services.

We identified underrepresented groups in the 2022 PNA residents’ survey and used targeted promotion to reach these groups for this year’s residents’ survey. Despite our efforts, some subgroups of the population remain

underrepresented. We have modified our approach to the formal consultation period to capture a more diverse range of views.

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Section 4a - What are the potential/actual impacts of the proposal on the protected characteristics?

| Protected Characteristic as per Equality Act 2010 | Impact? Positive (P) Negative (N) Neutral (Ne) | Details of impact | Actions to address negative impact or promote positive impact (use section 8 table) | Owner of action/ Timescale |
|---|---|--|---|-------------------------------|
| Age | Ne | <p>No direct impact of the recommendations on age.</p> <p>Young people underrepresented in the residents' questionnaire so their views may not have been adequately heard.</p> | <p>Targeted engagement with residents in the consultation process to increase representation of views of young people that were underrepresented in the initial residents' survey- see section 8.</p> | <p>EB/LM</p> <p>6 months</p> |
| Disability | P | <p>Recommendation that pharmacies should be easily accessible to all- aim for wheelchair access to all pharmacies and for spoken and written information to be provided in various accessible formats (and promotion of this in pharmacies).</p> | <p>Liaising with Community Pharmacy Black Country to create an action plan to facilitate this.</p> | <p>EB/LM</p> <p>1 year</p> |

| Protected Characteristic as per Equality Act 2010 | Impact? Positive (P) Negative (N) Neutral (Ne) | Details of impact | Actions to address negative impact or promote positive impact (use section 8 table) | Owner of action/ Timescale |
|---|---|--|---|-------------------------------|
| | | Given that 59.6% of respondents to the residents' questionnaire said that they were unsure as to whether their pharmacy makes changes to help people with disabilities, it is possible that this group was underrepresented in the residents' questionnaire. | Targeted engagement with residents in the consultation process to increase representation of views of people with disabilities that were possibly underrepresented in the initial residents' survey- see section 8. | 6 months |
| Gender Reassignment | Ne | No direct impact of the recommendations on gender reassignment. | - | - |
| Marriage and civil partnership | Ne | No direct impact of the recommendations on marital status. | - | - |

| Protected Characteristic as per Equality Act 2010 | Impact? Positive (P) Negative (N) Neutral (Ne) | Details of impact | Actions to address negative impact or promote positive impact (use section 8 table) | Owner of action/ Timescale |
|---|---|---|---|-------------------------------|
| Pregnancy and maternity | P | Recommendation for Tipton and Rowley Regis to have at least one pharmacy that provides Emergency Hormonal Contraception (EHC) free of charge. Promotes choice and aims to reduce teenage conception and associated risks. | Plan for more pharmacies to deliver the EHC service- including in Rowley Regis and Tipton. Onboarding process started. Plan for the National Pharmacy Contraception Service to include Emergency Hormonal Contraception. | EB/LM 6 months |
| Race | Ne | No direct impact of the recommendations on race. People from ethnic minority groups were underrepresented in the residents' questionnaire so their views may not have been adequately heard. | Targeted engagement with residents in the consultation process to increase representation of views of ethnic minority groups that were underrepresented in the | |

| Protected Characteristic as per Equality Act 2010 | Impact? Positive (P) Negative (N) Neutral (Ne) | Details of impact | Actions to address negative impact or promote positive impact (use section 8 table) | Owner of action/ Timescale |
|---|---|--|---|-------------------------------|
| | | | initial residents' survey- see section 8. | |
| Religion or belief | Ne | No direct impact of the recommendations on religion or belief. | - | - |
| Sex | Ne | <p>No direct impact of the recommendations on sex.</p> <p>Males were underrepresented in the residents' questionnaire so their views may not have been adequately heard.</p> | Targeted engagement with residents in the consultation process to increase representation of views of males that were underrepresented in the initial residents' survey- see section 8. | <p>EB/LM</p> <p>6 months</p> |

| Protected Characteristic as per Equality Act 2010 | Impact? Positive (P) Negative (N) Neutral (Ne) | Details of impact | Actions to address negative impact or promote positive impact (use section 8 table) | Owner of action/ Timescale |
|---|---|---|--|-------------------------------|
| Sexual Orientation | Ne | <p>No direct impact of the recommendations on sexual orientation.</p> <p>People from LGBTQ+ groups were underrepresented in the residents' questionnaire so their views may not have been adequately heard.</p> | <p>Targeted engagement with residents in the consultation process to increase representation of views of people from LGBTQ+ groups that were underrepresented in the initial residents' survey- see section 8.</p> | <p>EB/LM</p> <p>6 months</p> |
| Care Experienced (as per SMBC commitment from January 2025) | Ne | <p>No direct impact of the recommendations on people with care experience.</p> | - | - |

How could other socio-economic groups be affected?

| | | | | |
|--|------------------|--|---|------------------------------|
| <ul style="list-style-type: none"> • Carers • Low-income groups • Veterans/Armed Forces • Community • Other | <p>Ne</p> | <p>No direct impact of the recommendations on full time parents and carers.</p> <p>People from the above groups were underrepresented in the residents' questionnaire so their views may not have been adequately heard.</p> | <p>Targeted engagement with residents in the consultation process to increase representation of views of full time parents and carers that were underrepresented in the initial residents' survey- see section 8.</p> | <p>EB/LM</p> <p>6 months</p> |
|--|------------------|--|---|------------------------------|

If there are no adverse impacts or any issues of concern or you can adequately explain or justify them, then please move to Sections 6.

5. What actions can be taken to mitigate any adverse impacts?

In order to mitigate potential adverse impacts and harness positive impacts, we must ensure that views are heard across the diverse population of Sandwell. Please see section 8.

6. Section 6: Decision or actions proposed

Adjustments made to ensure barriers identified by EQIA are overcome. This is through enhancing the formal consultation process to include targeted engagement with underrepresented groups- see section 8.

7. Monitoring arrangements

The residents' survey in the formal consultation process will collect information on demographics of respondents to monitor whether the targeted engagement plan has had the desired effects and capture the views of a more representative sample of the diverse Sandwell population.

Specific protected characteristics monitored: age, sex, sexual orientation, working status, marital status, ethnicity, and religion.

The impacts of the enhanced consultation approach, including targeted engagement with underrepresented groups, will be reported in the Consultation report, as part of the final PNA 2025 document.

If effective in increasing representation, a similar approach to consultation could be used, earlier in the PNA process, for the next PNA 2028.

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Section 8 Action planning (if required)

| Question no. (ref) | Action required | Lead officer/ person responsible | Target date | Progress |
|--------------------|---|----------------------------------|---------------|---|
| Section 4a | Targeted engagement with residents to increase representation of views of the following groups that were underrepresented in the initial residents' survey: young people, males, ethnic minority groups, LGBTQ+ groups, full time parents, carers. This will be facilitated by voluntary organisations, through a variety of formats, selected to be most effective with their target audience e.g. focus groups, assisted completion of surveys. | EB/LM | December 2025 | Pre-consultation draft aim to be completed mid-July, HWBB late July, expression of interest form sent to voluntary organisations for involvement in consultation process. Previously underrepresented groups outlined in the expression of interest form. |

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If you have any suggestions for improving this process, please contact EDI_Team@Sandwell.gov.uk