

## RPS Equality Impact Assessment (EQIA)

### Equality Impact Assessment

An equality impact assessment is a tool to assess the impact of policies, products, strategies and decisions on the ability of an organisation to perform the below public-sector equality duties.

Public sector equality duty section 149 of the Equality Act 2010:

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it

Qualifications bodies equality duty section 53 of the Equality Act 2010:

- A qualifications body (A) must not discriminate against a person (B), in the arrangements A makes for deciding upon whom to confer a relevant qualification.
- A duty to make reasonable adjustments applies to a qualifications body.
- The application by a qualifications body of a competence standard to a disabled person is not disability discrimination unless it is discrimination by virtue of section 19

And to have due regard for advancing equality by:

- Removing or minimising disadvantages experienced by people due to their protected characteristics
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people
- Encouraging people with protected characteristics to participate in public life or in other activities where their participation is disproportionately low

To ensure RPS products, curricula, assessments, policies and guidance documents and strategies are designed and delivered fairly in accordance with the Equality and Human Rights Legislation, please complete the below Equality Impact Assessment form. Highlight any positive and/or negative impacts included in section 4; actions to be taken to address any negative impacts and opportunities for further developing positive impacts that enhance section 149 and 53 of the Equality Act 2010 and Welsh Language Standards (2011), when detailing existing good

practice in Section 10 of this form. In Scotland, there is a specific remote and rural protected characteristic that should be considered within all EQIAs. Concluding with how actions are to be monitored and reviewed.

## RPS Equality Impact Assessment (EQIA) Record

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|--|---|
| <b>Title of Policy/ Product / Strategy or Service</b>                              | RPS core advanced curriculum  |
| <b>Name of Directorate</b>   | Education   |
| <b>Name and role of lead(s) and individual(s) involved in completing this EQIA</b> | Stephen Doherty<br>RPS Advanced Pharmacist Programme Lead<br><br>Amandeep Doll<br>RPS Head of Professional Belonging<br><br>Rachael Parsons<br>Assessment and Credentialing Manager |
| <b>Contact Details of lead individual(s)</b>                                       | Stephen.doherty@rpharms.com   |
| <b>Date EQIA initiated</b>   | 8/11/21   |
| <b>Date EQIA agreed by accountable group/department</b>                            | 9/11/21   |
| <b>Signed (lead individual(s)/ head or chair of accountable group)</b>             | Joseph Oakley<br>Head of Assessment & Credentialing   |

## EQIA Summary Report

*(This is to be completed after the EQIA workshop/consultation process)*

### 1. Background

The RPS has developed a core advanced pharmacist curriculum to inform professional development training and pathways for advanced pharmacists. It articulates the knowledge, skills, behaviours and level of performance expected of advanced pharmacists working in patient-focused roles across different sectors in the UK.

The RPS credentialing assessment will ensure individuals are credentialed against the curriculum outcomes using a robust programme of assessment. Pharmacists wishing to be credentialed as advanced pharmacists are required to compile an electronic portfolio of evidence comprised a mixture of supervised learning events undertaken in the workplace and other pieces of evidence considered appropriate.

Evidence will be mapped to the curriculum outcomes and when the pharmacist has sufficient evidence to demonstrate achievement of the curriculum requirements, they can submit their portfolio for a final summative decision by an expert panel. The panel will review the evidence and reach a consensus view on whether the required standard has been met.

### 2. Engagement and evidence gathering

The RPS is committed to ensuring that its curricula and assessments are inclusive and represent the diversity of the profession. Inclusivity is one of the RPS assessment and credentialing principles and is integrated as a quality standard in the RPS curriculum quality framework.

A number of steps were taken in the curriculum development process to promote an inclusive approach:

- a) The RPS core advanced curriculum and assessment task and finish groups, which developed the draft curriculum, were constituted to include a broad range of practising pharmacists, at different levels of practice, academics and educational commissioning body representatives. This included representation from across the UK as well as from community pharmacy, primary and secondary care. The group was also comprised of individuals with a range of protected characteristics.
  
- b) A dedicated advanced practice inclusion and diversity reference group was constituted (membership drawn from the ABCD group) to review and help shape the curriculum. A representative from the reference group was included in each of the curriculum and assessment task and finish groups.

- c) Inclusivity and diversity are promoted in our assessment governance structures to ensure their membership mirrors the diversity of those undertaking the assessment programmes.
- d) Tasking our assessment panels and overarching quality governance board with monitoring and addressing differential attainment in our assessment programmes.
- e) We will collate and transparently publish equality and diversity data related to assessment performance.
- f) Providing clear reasonable adjustment processes for anyone undertaking the assessment who requires them on the grounds of a disability.
- g) Undertaking an iterative consultation process during the development process which included a targeted question to understand if there are any parts of the curriculum which may impact – positively or negatively – on individuals or groups sharing any protected characteristics. This led to some areas of the curriculum being amended to be more inclusive. A broad range of relevant stakeholder groups were targeted to encourage active engagement and participation in the iterative consultation.
- h) Undertaking a full and open consultation of the draft curriculum. A broad range of relevant UK stakeholder holder groups were targeted to encourage active engagement and participation in the consultation. This included groups representing individuals with protected characteristics, such as the UK Black Pharmacists Association, and the RPS inclusion and diversity network: Action in Belonging Culture and Diversity.
- i) Including a question in the full consultation to understand if there are any parts of the curriculum which may impact – positively or negatively – on individuals or groups sharing any protected characteristics. Responses from all stakeholders to this question were analysed, themed and reviewed by the Advanced Pharmacist Programme Lead and are summarised as follows:
- I. Potential disadvantage to pharmacists practising in community pharmacy. Our curriculum task and finish groups designed the curriculum to be achievable across all sectors, but we recognise some parts will be more challenging to achieve in some sectors. We hope the flexibility in the curriculum design helps to mitigate some of this.
  - II. Depending on their circumstances, some pharmacists may take longer to complete the programme of assessment. Examples include age, pregnancy, family, part-time working, care responsibilities, evening or weekend working, and those who have a career break / change. We have stated in our curriculum that there is no time limit and recognise that some individuals will take longer to complete due to their personal circumstances.
- j) Undertaking an Equality Impact Assessment. This was done collaboratively by the RPS Credentialing and Assessment team and the RPS Head of Professional Belonging. An initial assessment of the curriculum and credentialing process was undertaken internally to assess the potential impact on individuals from protected characteristic groups, as well as considering socioeconomic backgrounds, caring responsibilities, the Welsh language and rurality. This was followed by an Equality Impact Assessment workshop; external volunteers from the RPS Action in Belonging Culture and Diversity group were invited. Twelve volunteers attended the workshop representing the following characteristics:
- Age
  - Disability
  - Sex

- Gender identity

- Marriage or civil partnership
- Pregnancy and maternity
- Race
- Religion or belief
- Sexual orientation
- Carers

The individuals were invited to consider and discuss the impact of the core advanced curriculum on each of the characteristics. Welsh language, socioeconomic factors and rurality and remote access were also considered.

### 3. Main Findings

Table 1 summarises the potential impact aligned to each protected characteristic grouping.

In summary, the curriculum and credentialing process in its current form was determined to have a potential negative impact on those who are carers or from less affluent socioeconomic backgrounds, and pharmacists practising in remote and rural areas.

A number of recommended actions were determined by the group to help mitigate this; these are outlined in section 4.

There was no overall negative impact identified in relation to age, disability, gender identity, race, sex, marriage or civil partnership status, pregnancy/maternity, religion or sexual orientation.

In addition to those articulated in table 1, there are some overall considerations across all the protected characteristics which are:

- There may be bias from collaborators undertaking supervised learning events in the workplace. This bias could be with respect to any or a combination of the protected characteristics detailed above. It is extremely difficult to mitigate inherent bias but having a broad range of collaborators observe a pharmacist's performance using a wide range of assessment tools, as well as a competency committee comprised of diverse individuals, ensures diversity and richness of observation and helps to mitigate potential bias.
- A level of subjectivity could be introduced by the collaborators in each assessment. This will be minimised as no single assessment decision carries enough weight to pass or fail an individual. Additionally, there will be a range of collaborators observing the pharmacist's performance.
- Bias could also be introduced in the portfolio assessment process; steps are already in place to minimise this:
  - All advanced pharmacist competency committee members will receive mandatory training before their first portfolio review, an element of which will include the principles of unconscious bias and how a competency committee model using group-think assessment can help mitigate this. If any training deficits are noted by the RPS Education & Standards committee, we may introduce top up sessions.
  - RPS will capture the individual's demographic data at the point of submission of portfolio; the applicant's race, gender identity, age, sex and address will not be shared with the advanced pharmacist competency committee. Identifiable

- protected characteristic data will not be shared with any individual involved in reviewing the assessment from any RPS educational governance group.
- RPS will actively promote recruitment to the advanced pharmacist competency committee to attract diverse membership. When the number of assessors participating in competency committees is sufficient to avoid any issues with identifiable data, we will publish their demographic data along with any awarding gap data in our annual report.

#### 4. Recommendations & next steps

| Actions to be taken to address negative impacts and maximise positive impacts  | Timescales  |
|--|---|
| Specific guidance will be produced in different formats on how to use the RPS e-portfolio e.g. written guidance, webinars, recorded video demonstration  | Oct 2022  |
| The RPS will endeavour to make educational events accessible by considering the scheduling, format, and ensuring there is a recording of any live webinars that can be viewed at a time convenient to the individual.    | Ongoing   |
| The RPS will actively promote recruitment to the advanced pharmacist competency committee (APCC) to attract diverse membership and recruit solely on capability and experience rather than arbitrary age/years qualified | Ongoing   |
| Ensure information about the curriculum and credentialing process is presented in different formats in addition to written guidance e.g. video presentations, webinars, audio recordings.                                | Ongoing   |
| Ensure communications are clear about the accessibility options of uploading evidence to the e-portfolio in different formats or via different mechanisms through a reasonable adjustment request.                       | October 2022  |
| The RPS will release the dates for the submission deadlines one year in advance to allow planning for life events.   | Ongoing   |
| The training provided will make it clear that the content of the evidence is what is relevant rather than where it was collected.  | January 2023 (in line with the first assessor training) |
| RPS will work collaboratively with HEIW to support Welsh language needs of candidates (e.g. accessibility of curriculum information in Welsh, supporting completion of SLEs in Welsh)                                    | 2022  |
| The fee structure including resit fees will be clearly articulated on the website information and in the candidate guidance.   | October 2022  |

#### 5. Mitigating Factors

Please see table 1 for mitigating factors

## RPS Equality Impact Assessment Template

| 1. Impact Assessment   |          |          |         |   |  |
|--|----------|----------|---------|---|--|
| Equalities and Welsh Language Impact Assessment  |          |          |         |   |  |
| Protected Characteristic   | Impact:  |          |         | Key considerations and main findings  | Mitigating factors and actions (actions to be taken forward are in bold)   |
|  | POSITIVE | NEGATIVE | NEUTRAL |   |  |
| <b>Age</b><br><br>main categories:<br>under 16<br>16-24<br>25-34<br>35-44<br>45-54<br>55-59<br>60-64<br>65-74<br>75+ |          |          | X       | Some age groups may have less experience using digital technology (required for using e-portfolio and undertaking supervised learning events (SLEs) remotely)   | <b>Specific guidance will be produced in different formats on how to use the RPS e-portfolio e.g. written guidance, webinars, recorded video demonstration</b>   |
|  |          |          |         | Workplace hierarchies or age based discrimination may create barriers to exposing more junior pharmacists to learning experiences to meet the outcomes across all domains (e.g. leadership, management, education and research)                           | It is accepted that limitation of opportunity for more junior pharmacists due to strong hierarchy within an individual's organisation is outside RPS control   |
|  |          |          |         | There may be age related discrimination if people are required to work outside normal day time hours due to family / carer responsibilities. This could make it more difficult to involve colleagues in SLEs and undertake period of learning in practice | We have promoted flexibility throughout the curriculum including using remote technology to support SLEs. All pharmacists should have access to feedback as a matter of course (regardless of employment model) and the flexible model |

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|  |  |   |  |   | described will maximise the opportunity for pharmacists to capture feedback.   |
|  |  |   |  | Older age groups may have more family / caring responsibilities which may impact on their availability for any scheduled activities e.g. peer review meetings / webinars that fall out with their normal working hours, and if required to use their own time to complete some of their portfolio / independent prescribing course requirements | <p><b>The RPS will endeavour to make educational events accessible by considering the scheduling, format, and ensuring there is a recording of any live webinars that can be viewed at a time convenient to the individual.</b></p> <p>The RPS does not state a time limit for completing the curriculum.</p>                |
|  |  |   |  | Assessment panel members may be older.  | <p>It is likely that most assessment panel members will be older than the candidates but <b>the RPS will actively promote recruitment to the advanced pharmacist competency committee (APCC) to attract diverse membership and recruit solely on capability and experience rather than arbitrary age/years qualified</b></p> |
|  |  | X |  | Collaborators/assessors may make assumptions about capability based on the amount of experience a candidate has, which may impact on younger candidates.  | <p>The use of SLE's help to focus feedback on the specific skill/capability for which the feedback is being generated.</p> <p>APCCs will not be provided with the candidate's age.</p> <p><b>The RPS will actively promote recruitment to the advanced pharmacist competency committee</b></p>                               |



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|  |  |  |   |   | <b>(APCC) to attract diverse membership and recruit solely on capability and experience rather than arbitrary age/years qualified</b>  |
| <b>Disability</b><br><br>Disability as defined in the Equality Act 2010: Those with any physical, sensory, learning, cognitive or mental health impairment or health condition which causes individuals to face barriers to employment, equal opportunities, access to goods, facilities or services |  |  | X | Pharmacists with a learning difference and/or physical disability may need additional tools/software for documents to be read out aloud on the website and e-portfolio.<br><br>The curriculum document and associated resources include a lot of text which may disadvantage those with a learning difference and/or physical disability. | Documents should be reformatted to ensure they are accessible and easy to read for individuals with visual impairment and learning differences. The use of acronyms will be minimised.<br><br>There may be a need for additional tools/software for documents to be read out aloud on the website and e-portfolio to support this.<br><br><b>Ensure information about the curriculum and credentialing process is presented in different formats in addition to written guidance e.g. video presentations, webinars, audio recordings.</b> |

# ROYAL PHARMACEUTICAL SOCIETY

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| <p>lasting or expected to last 12 months or more, or terminal.</p> |  |  |          | <p>People with a learning difference and/or physical disability may have difficulty producing written evidence or reflective accounts</p>  | <p>Flexibility in evidence type for the e-portfolio is available aside from outcomes where evidence of direct observation is required; a variety of evidence formats can be uploaded based on learner preference (e.g. videos or audio)</p> <p><b>Ensure communications are clear about the accessibility options of uploading evidence to the e-portfolio in different formats or via different mechanisms through a reasonable adjustment request.</b></p> |
|  |  |  |          |  |  |
| <p><b>Sex</b></p> <p>A person's sex, including intersex people</p> |  |  | <p>X</p> | <p>Female pharmacists may be more likely to find it challenging to participate in the credentialing process due to family-friendly leave and/or working part time or having caring responsibilities, which is sex-differentiated.</p>            | <p>There is no time limit to complete the portfolio or credentialing process, this provides flexibility for those requiring to pause their portfolio development.</p>  |
|  |  |  |          | <p>Due to sex based discrimination female pharmacists may find it more challenging to access the opportunities required to demonstrate their capability against the curriculum outcomes (eg, leadership, management, education and research)</p> | <p>It is accepted that limitation of opportunity for more junior pharmacists due to sex-based discrimination within an individual's organisation is outside RPS control</p>  |

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|   |  |  |   | There is a pay gap between male and female pharmacists; need to ensure the is equity for pharmacists who have been awarded the credential   | This is out with the control of the RPS for the curriculum but the RPS continues to raise the importance of gender equality through its advocacy work.  |
|   |  |  |   | The assessment panels may be imbalanced in terms of sex   | We will actively promote recruitment to the advanced pharmacist competency committee (APCC) to ensure this is balanced.   |
|   |  |  |   | Women's related health issues (periods, menopause) may impact on a woman's ability to engage with portfolio development and credentialing.  | There is no time limit to complete the portfolio or credentialing process, this provides flexibility for those requiring to interrupt or pause their portfolio development.   |
|   |  |  |   |   |   |
| <b>Gender Identity</b><br><br>Internal sense of their own gender and gender expression, whether male, female or something else (for example non-binary people), which may or may not correspond to the sex assigned at birth; and |  |  | X | Recognition bias could come into the assessment process through crude inference of the applicant's name.  | It is a requirement to share the name of the applicant with the assessors so any potential conflicts of interest can be identified. No other personal information will be shared with the assessors or assessment panel, including the individual's title e.g. Miss/Mrs/Mr/Mx |
|   |  |  |   | Individuals who transition during the process of building their portfolio, may not wish to have reference to their previous name, their previous name could be anonymised from their records. | The option for the redaction of previous names will be available for any individual who a undergoes gender transition during the process of building their portfolio. This will be reviewed on a case by case basis in collaboration with the candidate.                      |

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| aspects of how an individual expresses gender, including clothing, mannerisms and other aspects of expression. |  |  |   | Individuals who transition during their programme may need to extend the time taken to complete credentialing.   | There is no time limit to complete the portfolio or credentialing process.   |
|  |  |  |   | Individuals who are in transition may need pastoral support when reflecting on themselves.   | Support mechanisms should be put in place by the employer and/or any training provider involved in supporting the candidate.   |
| <b>Marriage or civil Partnership</b>   |  |  | X | Managing a major life event, such as planning a wedding may impact on a candidates ability to complete their credentialing.                            | <b>The RPS will release the dates for the submission deadlines one year in advance to allow planning for life events.</b><br><br>We recognise unexpected life events occur and have not set a time limit to complete the portfolio |
|  |  |  |   | The curriculum is not considered to create unlawful discrimination related to marriage or civil partnership.   |  |
| <b>Pregnancy and maternity</b>   |  |  | X | Those taking family friendly leave or undergoing processes as part of planning a family may find it more challenging to collate the required evidence. | The RPS does not set a time limit for completing the portfolio and credentialing process.  |

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| <p><b>Race</b></p> <p>Race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers.</p> |  |  | X | <p>Recognition bias could come into the assessment process through crude inference of the applicant's name</p>  | <p>There will be a requirement to share the name of the applicant with assessors so any potential conflicts of interest can be identified. No other personal information will be shared with the assessors or assessment panel, including the individual's ethnicity.</p> <p>Assessment panels will be constituted with as broad a range of assessors as possible to help mitigate and identify bias.</p> |
|  |  |  |   | <p>There are outcomes and descriptors in the curriculum that refer to taking action to demonstrate cultural effectiveness and refer to cultural beliefs, diversity and intrinsic cultural bias so cultural effectiveness should be improved through completion of the credentialing process</p> |   |
|  |  |  |   | <p>Pharmacists who are from Black and Asian backgrounds are more likely to be locums than other race and ethnicities<sup>3</sup> This may impact on their ability to collect feedback and populate their portfolio.</p>   | <p>Although the drivers for this are outside of the RPS's control, the flexible nature of the credentialing process, and absence of a time limit should act to minimise the barriers this creates.</p>  |
|  |  |  |   | <p>The assessment panel should receive equality, diversity and inclusion training and include representation from different protected characteristics.</p>  | <p>All panel members will be required to undertake mandatory training, which includes conscious and unconscious bias.</p> <p>The RPS will promote inclusivity and diversity in our assessment panels to</p>   |

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|  |  |  |   |  | <p>deliver panels that reflect the diversity of those undertake the assessment. Panel members will be required to record EDI data and this will be monitored.</p>  |
|  |  |  |   | <p>Some candidates may have evidence from practice/experience outside of the UK which may bias the assessors.</p>  | <p>The training provided makes it clear that the content of the evidence is what is relevant rather than where it was collected.</p>   |
|  |  |  | <p>Pharmacists who have trained outside of the UK, in a different language.</p> <p>Whilst all pharmacists will be competent communicators in English, writing styles may be different and bias the assessors.</p> |  | <p>Candidates are welcome to upload evidence in a range of formats.</p> <p>The portfolio will be made up of content written by the candidate but also by a range of collaborators.</p> <p>All panel members will be required to undertake mandatory training, which includes conscious and unconscious bias.</p> <p>The RPS will promote inclusivity and diversity in our assessment panels to deliver panels that reflect the diversity of those undertake the assessment. Panel members will be required to record EDI data and this will be monitored</p> |
|  |  |  |   | <p>Work permits and visas can limit the mobility of an individual pharmacist which may limit their ability to develop their advanced capabilities/portfolio.</p> | <p>The core advanced curriculum has been designed with a broad range of stakeholders to be achievable in any patient-focussed setting.</p>   |

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| <p><b>Religion or Belief</b></p> <p>Religion includes any religion as well as lack of religion. Belief means any religious or philosophical belief.</p>   |  |   | X | <p>Religious festivals and commitments may coincide with educational elements or submission deadlines.</p>  | <p>The RPS will release the dates for the submission deadlines one year in advance to allow planning religious festivals.</p> <p>Candidates are able to submit portfolios in advance of submission deadlines to allow better planning.</p>               |
| <p><b>Sexual Orientation</b></p> <p>A person's orientation towards people of the same sex, the opposite sex or more than one gender.</p>                  |  |   | X | <p>Candidates who face challenges in the workplace because of their sexual orientation may find portfolio completion more challenging.</p>  | <p>Although the drivers for this are outside of the RPS's control, the flexible nature of the credentialing process, and absence of a time limit should act to minimise the barriers this creates.</p>   |
| <p><b>Carers</b></p> <p>A carer is anyone, including children and adults who looks after a family member, partner or friend who needs help because of</p> |  | X |   | <p>There are financial implications to accessing the credential (the assessment fee, access to non-funded education, access to RPS member benefits e.g. webinars) that may impact disproportionately on carers.</p> | <p>There is no expectation as to whether it is the individual or the employing organisation who pays the assessment fee. Carers may be able to receive funding to cover the assessment fee from their employer.</p> <p>This is out with RPS control.</p> |

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| health condition, physical, sensory, cognitive, learning, or mental health impairment and cannot cope without their support. The care they give is unpaid. |  |  |  |   | Access to RPS member benefits could not reasonably be opened up to non-members as this would be an inappropriate use of member fees. |
|  |  |  |  | Carer commitments may impact on the pharmacist's availability for any scheduled activities e.g. peer review meetings / webinars that fall out with their normal working hours, and if required to use their own time to complete some of their portfolio. | The RPS does not set a time limit for completing the portfolio and credentialing process.  |
|  |  |  |  | COVID-19 has impacted on all of society but it was felt this is likely to have been disproportionate for those with caring responsibilities.  |  |
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| <p><b>Welsh Language</b><br/>Opportunities for persons to use the Welsh Language.</p> <p>Treating the Welsh language no less favourably than the English language.</p> |  | X |  | <p>Good practice from Wales is that the curriculum needs to be bilingual, but this must be supported by the statutory education body in Wales.</p> <p>If Welsh is the individual's first language, they would be disadvantaged if they had to write their portfolio in English. They may undertake SLEs with a patient who speaks Welsh in which case their assessor would also need to speak Welsh.</p> | <p>The curriculum has not been translated into any other languages. The assessment programme will be conducted in English.</p> <p><b>RPS will work with HEIW to ascertain the appetite/potential to translate the curriculum and for any processes that may support some of the assessment activity to be undertaken in Welsh.</b></p> |
| Other  |  |   |  |  |  |
| <p><b>Remote and rural</b></p>   |  |   |  | <p>The RPS curriculum has been designed to be flexible and deliverable in all sectors and workplace settings. In remote and rural workplaces and smaller community pharmacies, it is likely the pharmacist will need to rely more on using remote technology for undertaking meetings and supervised learning events. This will require sufficient broadband speed to work effectively.</p>              | <p>We hope the flexibility in the curriculum design and promoting use of remote technology will help mitigate many of the issues in remote and rural settings.</p>   |
|  |  |   |  | <p>To improve the reliability of the assessment programme, pharmacists should undertake supervised learning events with a variety of people. Pharmacists working in more isolated</p>  | <p>While the curriculum describes three different supervision roles, we recognise that in smaller and more isolated work settings, one person may take on more than one</p>  |

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|  |  |  |  | <p>settings are likely to find this more difficult.</p> <p>In smaller and more isolated work settings it may be more challenging to secure supervision support and the individual will need to rely more on remote technology and/or people who support on a peripatetic basis rather than work in the same setting as the individual.</p>   | <p>supervision role, which is still acceptable.</p> <p>Whilst this may increase the impact of any bias that the supervisor held candidates will be accessing feedback from a broad range of collaborators.</p> <p>The majority of supervised learning events can be conducted remotely which maximised the ability of candidates to access feedback from a broad range of collaborators.</p>  |
|  |  |  |  |  |   |
| <b>Different Socio-economic groups</b> |  |  |  | <p>There is an assessment fee which may result in economic exclusion</p> <p>There may be different funding models depending how training programmes will be delivered. There will be an associated fee for undertaking any HEI delivered training although there is no requirement to undertake formal learning.</p> <p>Individuals could achieve the curriculum outcomes without with any formal training programme.</p> <p>Both RPS members and non-members can undertake the advanced pharmacist credentialing assessment. There will be no financial benefits for members however they may benefit</p> | <p>Both RPS members and non-members will have access to exemplar supervised learning event templates. In addition, once there are a few candidates who have been credentialed, with consent, their evidence will be used as examples to show the standard expected. This, in combination with the standard being clearly articulated by the descriptors, should mitigate applicants submitting and paying for portfolios with little chance of success because they are unaware do not meet the required standard.</p> <p>The resit fee structure will be clearly articulated on the website information and in the candidate guidance.</p> |

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|  |  |  |  | from other member offers e.g. webinars. | The credentialing fee may be paid/subsidised by employers or other organisations e.g. SEBs. |
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| <p><b>2. If the policy, product, strategy and or decision is intended to increase equality of opportunity through positive action, does it appear to be lawful? (<a href="#">EHRC Positive Action in the Workplace</a>)</b></p> <p><i>Briefly explain the reason for the answer, making reference to any relevant evidence</i></p> |
| <p><b>Not applicable</b></p>   |

|  |  |
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| <b>3. Is the policy directly or indirectly discriminatory under the Equality Act 2010?</b>             |  |
| NO   |  |
| <b>If the policy is indirectly discriminatory, how is it justified under the relevant legislation?</b> |  |
| <b>If not justified, what mitigating action will be undertaken?</b>                                    |  |

**- Action Planning**

- *If a negative impact or discrimination that is unlawful has been identified, the organisation must take immediate action to address this.*
- *If a negative impact or discrimination that is justifiable, legitimate or unavoidable has been identified, the organisation will need to consider what steps could be taken to reduce the impact on these groups of people.*
- *If negative impact or discrimination which could be designed out of the policy has been identified, the organisation needs to consider what actions could be taken to achieve this outcome.*

*Advancing equality of opportunity has been further defined as:-*

- *Removing or minimising disadvantages suffered by people due to their protected characteristic;*
- *Taking steps to meet the needs of people from protected groups where those are different from the need of other people;*
- *Encouraging people from protected groups to participate in public life or in activities where their participation is disproportionately low*

*If the potential for a positive impact has been identified, the organisation needs to consider what steps could be taken to explore this opportunity*

| Actions to be taken to address negative impacts and maximise positive impacts  | Potential Outcomes  | Lead Team | Timescales                                  |
|--|---|-----------|---|
| Specific guidance will be produced in different formats on how to use the RPS e-portfolio e.g. written guidance, webinars, recorded video demonstration  | This will support the accessibility of the e-portfolio for those for whom this may be a challenge                           | A&C       | July 2022 (in line with e-portfolio launch) |
| The RPS will endeavour to make educational events accessible by considering the scheduling, format, and ensuring there is a recording of any live webinars that can be viewed at a time convenient to the individual.    | This will help to negate the impact on any learners who can not attend due to other commitments                             | A&C       | Ongoing                                     |
| The RPS will actively promote recruitment to the advanced pharmacist competency committee (APCC) to attract diverse membership and recruit solely on capability and experience rather than arbitrary age/years qualified | This will help to mitigate bias in the assessment by having assessors who reflect the diversity of the candidate population | A&C       | Ongoing                                     |

|  |   |               |              |
|--|---|---------------|--------------|
| Ensure information about the curriculum and credentialing process is presented in different formats in addition to written guidance e.g. video presentations, webinars, audio recordings.          | This will support candidates who prefer to access content via different media, including those who are disabled                                 | A&C           | Ongoing      |
| Ensure communications are clear about the accessibility options of uploading evidence to the e-portfolio in different formats or via different mechanisms through a reasonable adjustment request. | This will support candidates to capitalise on the flexible nature of the credential and minimise the challenges faced by those who are disabled | A&C           | October 2022 |
| The RPS will release the dates for the submission deadlines one year in advance to allow planning for life events.   | This will support people to plan their submissions and help minimise the impact of important events on the candidates                           | A&C           | Ongoing      |
| The training provided will make it clear that the content of the evidence is what is relevant rather than where it was collected.  | Minimise the risk of assessors introducing bias against candidates who trained outside of the UK  | A&C           | Jan 2022     |
| RPS will work with HEIW to ascertain the appetite/potential to translate the curriculum and for any processes that may support some of the assessment activity to be undertaken in Welsh.          | This will support candidates who undertake their development and vocational activities in Welsh   | A&C with HEIW | October 2022 |
| The fee structure including resit fees will be clearly articulated on the website information and in the candidate guidance.   | This will make the associated costs clear to candidates   | A&C           | October 2022 |

#### 4. Monitoring Arrangements

- *What are the plans to monitor the actual and/or final impact? (The EQIA will help anticipate likely effect but final impact may only be known after implementation).*
- *What are the proposals for reviewing and reporting actual impact?*

The following data will be monitored as part of the annual review:

- Demographic data of candidates.
- Successful completion rates by protected characteristic.

- Demographic data of advanced pharmacist competency committee members.

A report will be prepared by the RPS Assessment and Credentialing team and will be reviewed by the RPS Advanced Pharmacist Assessment Panel and the RPS Education and Standards Committee. Any issues identified will be addressed.

**Approved by: Joseph Oakley, Head of Assessment & Credentialing**

Thank you for completing this Equality Impact Assessment (EIA)