

RPS Equality Impact Assessment (EQIA) Report

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

Title of Policy/ Product / Strategy or Service	RPS & CMHP - Advanced Pharmacist - Mental Health Curriculum
Name of Directorate	Assessment and Credentialing
Name and role of lead(s) and individual(s) involved in completing this EQIA	Caroline Parker Mental Health Pharmacist and Mental Health Curriculum lead for the RPS Amandeep Doll RPS Head of Professional Belonging and Engagement Patsy Edwards RPS Assessment & Credentialing Lead
Contact Details of lead individual(s)	Amandeep.Doll@rpharms.com patsy.edwards@rpharms.com
Date EQIA initiated	16 th November 2023
Date EQIA agreed by accountable group/department	5 th September 2024
Signed (lead individual(s)/ head or chair of accountable group)	Joseph Oakley Associate Director - Assessment & Credentialing

EQIA Summary Report

1. Background

The RPS and the College of Mental Health Pharmacy (CMHP) have jointly developed an Advanced Pharmacist Mental Health curriculum to inform professional development training and pathways for advanced pharmacists in mental health. It articulates the knowledge, skills, behaviours and level of performance expected of advanced pharmacists working in patient-focused roles delivering mental health care across different settings in the UK.

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

Evidence will be mapped to the mental health 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 and CMHP are committed to ensuring that 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 mental health curriculum development process to promote an inclusive approach:

- a) The RPS advanced pharmacist mental health curriculum task and finish groups, which developed the curriculum and assessment processes, consisted of practising pharmacists working at different levels of practice, from different sectors of healthcare including primary and secondary care and the third sector, as well as from academia and educational commissioning bodies. Representation was from all the UK nations. The groups also comprised of individuals with a range of protected characteristics.
- b) Inclusivity and diversity are promoted in the RPSs' assessment governance structures to ensure their membership mirrors the diversity of those undertaking the assessment programmes.
- c) The RPS will collate and transparently publish equality and diversity data related to assessment performance.
- d) The joint RPS and CMHP consultation process included targeted questions to understand if there are any parts of the curriculum or assessment process which may impact individuals or groups sharing any protected characteristics.

- e) Undertaking an Equality Impact Assessment. This was initiated by curriculum lead, then reviewed by the mental health curriculum task and finish group, then by the RPS Credentialing and Assessment team and the RPS Head of Professional Belonging and Engagement.
- f) An equality and diversity workshop was conducted with invited volunteers from the RPS Action in Belonging Culture and Diversity (ABCD) group and CMHP membership to review and shape the curriculum and assessment process.

3. Main Findings

The mental health advanced curriculum and credentialing process in their current form were determined not to have an impact on any specific group of people from the protected characteristic.

A number of recommended actions were identified to help mitigate possible effects; these are outlined in section 4.

Table 1 summarises the potential impact aligned to each protected characteristic group. Additionally there are some overall considerations across all the protected characteristics:

- There may be bias from collaborators undertaking supervised learning events in the workplace. This bias could be with respect to one or a combination of the protected characteristics. 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:
 - o 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 training deficits are noted by the RPS Education & Standards committee, we may introduce top up sessions.
 - o RPS will capture the individual's demographic data at the point of portfolio submission; data will not be shared with the advanced pharmacist competency committee or any individual involved in reviewing the assessment from any RPS educational governance group.
 - o 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.

- RPS Portfolio Webinars - to consider who lead/presents these. To try to have a range of diverse individuals who are good role models.

4. Recommendations & next steps

Actions to be taken to address negative impact and maximise positive impacts	Timescales
The RPS will continue to make educational events such as portfolio webinars, accessible by considering the scheduling, format (e.g. with subtitles and transcripts), and ensuring there is a recording of live webinars that can be viewed at a time convenient to the individual and in suitable formats (e.g. with timestamps).	Ongoing throughout 2024
The RPS will endeavour to make good examples of portfolio evidence more clearly available and accessible on the website, with more and clearer links to these.	By end of 2025
The RPS will actively promote recruitment to the advanced pharmacist competency committees (APCC) to attract diverse membership and recruit solely on capability and experience rather than arbitrary age/years qualified.	Ongoing
RPS to keep under review the diversity of the people presenting/delivering the portfolio webinars and teaching sessions.	Ongoing Reviewed annually
Ensure information about the curriculum and credentialing process is presented in different formats in addition to written guidance e.g. live and recorded video presentations and webinars with subtitles and transcriptions, audio recordings.	By end of 2025
The RPS releases the dates of submission deadlines in advance to allow planning for life events.	Annual release
The training provided makes it clear that the content of the evidence is what is relevant rather than where it was collected.	Ongoing
RPS will work with HEIW if they identify a need to translate the curriculum and any processes that may support some of the assessment activity to be undertaken in Welsh.	On-going
The fee structure for submitting for either the core or both the core and MH module together by instalments by a payment plan scheme -will be explored by RPS A&C team and finance team	By end of 2025
The fee structure including resit fees will be clearly articulated on both the CMHP and RPS website.	Within 3 months of launch

5. Mitigating Factors

Refer to table 1 for mitigating factors.

Part 3. Table 1: RPS Equality Impact Assessment Template

1. Equalities and Welsh Language Impact Assessment Workshop					
Additional recommendations, actions & conclusions captured at the Equality Impact Assessment workshop.					
Protected Characteristic	Impact:			Key considerations and main findings	Mitigating factors and actions
	POSITIVE	NEGATIVE	NEUTRAL		
Age	neutral			Applicants DoB is not passed to the assessors.	Specific guidance has been produced in different formats on how to use the RPS e-portfolio e.g. written guidance, webinars, recorded video demonstrations.
				Some age groups may have less experience using digital technology (required for using e-portfolio and undertaking supervised learning events (SLEs) remotely.	The supervised learning event tools can be printed, the supervisor can provide written feedback which can be uploaded into the e-portfolio as a photo if required.
				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	Educational events are made accessible by considering their scheduling and format, also ensuring there is a recording of live webinars that can be viewed at a time convenient to the individual. The RPS continues to actively promote recruitment to advanced pharmacist competency committees (APCC) to attract diverse membership and recruit solely on capability and experience rather than arbitrary age/years qualified.

<p>Disability 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 lasting or expected to last 12 months or more, or terminal.</p>	<p>neutral</p>	<p>The curriculum (both core and MH) and associated resources are quite wordy and this could be overwhelming for neurodiverse applicants.</p>	<p>Information about the curriculum and credentialing process is presented in different formats in addition to written guidance e.g. video presentations, webinars, audio recordings.</p>
		<p>The e-portfolio as a platform maybe difficult to interact with, this could be overwhelming for neurodiverse applicants. Recommended that examples of completed evidence are made easily available within the RPS website.</p>	<p>The team will look to see if clear hyperlinks in easy to find locations, such as each portfolio page to examples of good evidence are possible.</p>
		<p>The curriculum document and associated resources include a lot of text which may disadvantage individuals with a learning difference and/or disability. Individuals with a learning difference and/or disability may have difficulty producing written evidence</p>	<p>Clear communications are in place advising the accessibility options of uploading evidence to the e-portfolio in different formats or via different mechanisms through a reasonable adjustment request. To ascertain if recordings can have subtitles and/or whether transcriptions, time stamps/ chapters were available.</p>
		<p>RPS Portfolio Webinars - these are recorded and made available online for people to watch at a later time. Webinars are suitable for those who would prefer a non-written approach to learning and understanding the process.</p>	<p>To establish whether specific topics can be coded i.e. specifying the time point in the webinars that are more than one hour. Would make navigation more straightforward.</p>

<p>Sex A person's sex, including intersex people</p>	<p>neutral</p>	<p>Women's related health issues (periods, menopause) may impact on a woman's ability to engage with portfolio development and credentialing.</p>	<p>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.</p> <p>Details of the applicant's sex are not shared with assessors.</p>
<p>Gender Reassignment 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 aspects of how an individual expresses gender, including clothing,</p>	<p>neutral</p>	<p>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.</p>	<p>The e-portfolio system allows applicants to amend their own details (name).</p> <p>Details of the applicant's gender are not shared with assessors.</p>

mannerisms and other aspects of expression.			
Marriage or civil Partnership	neutral	<p>Managing a major life event, such as planning a wedding may impact on a candidates ability to complete their credentialing.</p> <p>An individual may get married or divorced and change their name whilst building their portfolio.</p>	<p>The RPS releases the dates for portfolio submission deadlines in advance, this allows candidate to plan submissions around life events.</p> <p>The e-portfolio system allows applicants to amend their own details including name. The applicants name needs to reflect that on the GPhC register to enable the RPS to confirm UK registration.</p>
Pregnancy and maternity	neutral	<p>Those taking family friendly leave or undergoing processes as part of planning a family may find it more challenging to collate the required evidence.</p> <p>Noted that this needs to be expanded to include paternal, adoption, fostering and grandparent responsibilities. Also fertility treatments and miscarriages.</p>	<p>The RPS releases the dates for portfolio submission deadlines in advance, this allows candidate to plan submissions around life events.</p>

<p>Race Race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers</p>	<p>neutral</p>	<p>Recognise 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. Assessment panels will be constituted with as broad a range of assessors as possible, will be required to undertake mandatory training including conscious and unconscious bias training to help mitigate and identify bias.</p> <p>Panel members will be required to record EDI data and this will be monitored.</p> <p>There will be a range of people undertaking the SLEs for the individual in the workplace which will mitigate against bias from any particular person.</p>
		<p>Individuals may also experience discrimination in the workplace in the SLEs, pharmacists from Black and Asian backgrounds are more likely to be locums compared to other ethnicities. This may impact on their eligibility to register for training programmes given the requirements for independent prescribing, supervision and supervised learning events.</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>Religion or Belief Religion includes any religion as well as lack of religion. Belief means any religious or philosophical belief</p>	neutral	Religious festivals and commitments may coincide with educational elements or submission deadlines	<p>Details of the applicant’s religion or beliefs are not shared with assessors.</p> <p>The RPS releases the dates for portfolio submission deadlines in advance, this allows candidate to plan submissions around religious festivals and commitments.</p> <p>Webinars are recorded, therefore can be accessed when suitable for the individual.</p>
<p>Sexual Orientation A person’s orientation towards people of the same sex, the opposite sex or more than one gender.</p>	neutral	No particular issues have been identified. Sexual orientation data will not be collected	
<p>Carers A carer is anyone, including children and adults who looks after a family member, partner or friend who needs help because of</p>	neutral	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 releases the dates for portfolio submission deadlines in advance, this allows candidate to plan submissions around carer responsibilities and commitments.

<p>health condition, physical, sensory, cognitive, learning, or mental health impairment and cannot cope without their support. The care they give is unpaid.</p>		<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>The fees for applying for portfolio assessment, and re-application, are clearly displayed on the RPS website, and will be added to the CMHP website. There is no time limit for completing the portfolio and applying for credentialing once started.</p>
<p>Welsh Language Opportunities for persons to use the Welsh Language. Treating the Welsh language no less favourably than the English language.</p>	<p>Neutral</p>	<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. 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>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.</p>
<p>Other</p>			

Remote and Rural		<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 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>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 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>

<p>Different Socioeconomic groups</p>	<p>Neutral</p>	<p>Acknowledged that membership of neither the RPS or CMHP is a requirement for portfolio assessment.</p> <p>Fees for submitting for the Core PLUS the mental health module will be the same as submitting for Core curriculum assessment alone, so that there is no disadvantage or disincentive to applicants working in this speciality.</p> <p>Fees for portfolio assessment currently required as a lump payment, which may be more challenging for those in a lower socioeconomic group.</p> <p>Requested a payment plan scheme so that fees can be paid in instalments prior to submission.</p> <p>Consideration needs to be given to assumptions being made:</p> <p>People having access to IT equipment, some individuals may not have access to a personal laptop or limited access to a family computer, therefore would need to stay in work late or go to the library to build their evidence and portfolio. Access to wifi, this may not be the case for</p>	<p>Peer group support</p> <p><u>MH Specific:</u> the CMHP offers a wealth of peer support to members. Membership of the CMHP is not a curriculum requirement.</p>
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		everyone.	
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<p>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? (EHRC Positive Action in the Workplace) <i>Briefly explain the reason for the answer, making reference to any relevant evidence</i></p>
not applicable.

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

<p>Action Planning</p> <ul style="list-style-type: none"> • <i>If a negative impact or discrimination that is unlawful has been identified, the organisation must take immediate action to address this.</i> • <i>- 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.</i> • <i>- 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.</i> • <i>Advancing equality of opportunity has been further defined as:-</i> • <i>- Removing or minimising disadvantages suffered by people due to their protected characteristic;</i>

<ul style="list-style-type: none"> - 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	Time-scale
The RPS will continue to make educational events such as portfolio webinars, accessible by considering the scheduling, format (e.g. with subtitles and transcripts), and ensuring there is a recording of live webinars that can be viewed at a time convenient to the individual and in suitable formats (e.g. with timestamps).	This will help to negate the impact on neurodiverse learners, and those who cannot attend due to other commitments.	A&C	Ongoing throughout 2024
The RPS will endeavour to make good examples of portfolio evidence more clearly available and accessible on the website, with more and clearer links to these.	This will help to support neurodiverse learners navigate and use the website and eportfolio.	Education team	By end of 2025
The RPS will actively promote recruitment to the advanced pharmacist competency committees (APCC) to attract diverse membership and recruit solely on capability and experience rather than arbitrary age/years qualified.	This helps to mitigate bias in the assessment by having assessors who reflect the diversity of pharmacists.	A&C and I&D	Ongoing
RPS to keep under review the diversity of the people presenting/delivering the portfolio webinars and teaching sessions.	Those leading and influencing candidates in their portfolio journey reflect the diversity of pharmacists and are good role models.	A&C + I&D	Ongoing Reviewed annually
Continue to ensure information about the curriculum and credentialing process is presented in different formats in addition to written guidance e.g. live and recorded video presentations and webinars with subtitles and transcriptions, audio recordings.	This supports candidates who prefer to access content via different media.	A&C	By end of 2025
The RPS releases the dates of submission deadlines in advance to allow planning for life events.	This supports people to plan their submissions and help minimise the impact of important events on	A&C	Annual release

	candidates.		
The training provided makes 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	Ongoing
RPS will work with HEIW if they identify a need to translate the curriculum and 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	Ongoing
RPS to review whether the required assessment fees could be paid in instalments via a payment plan scheme.	This may ease the financial pressure to those under greater financial stress, and therefore will remove a possible bias against those of a lower economic status.	A&C	By end of 2025
The fee structure including resit fees will be clearly articulated on both the CMHP and RPS website.	Makes the costs clear to candidates.	A&C and CMHP	Within 3 months of launch

<p>Monitoring Arrangements</p> <ul style="list-style-type: none"> • <i>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).</i> • <i>What are the proposals for reviewing and reporting actual impact?</i> • <i>The EqIA must specify a system of monitoring which is reviewed on an annual basis.</i>
<p>The following data will be monitored as part of the annual review:</p> <ul style="list-style-type: none"> • Demographic data of candidates (this is optional). • Successful completion rates by protected characteristic. • Demographic data of advanced pharmacist competency committee members (providing this is optional).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.
<p>Signed: Patsy Edwards - Assessment & Credentialing Lead</p>
<p>Date: 5th September 2024</p>

Approved by: Joseph Oakley, Associate Director - Assessment & Credentialing

