



Equality and Health Impact Assessment

History-based penicillin allergy de-labelling in adults

AWTTC will fill in an Equality and Health Impact Assessment in parallel with each development stage of our projects. This will help us to follow the five ways of working for public bodies, and work to achieving the wellbeing goals, outlined in the Well-Being of Future Generations (Wales) Act 2015.

Date: 21/05/26

1.	AWTTC contact details	Tel: 02921 826900 Email: awttc@wales.nhs.uk
2.	State the objectives of the project.	Penicillin allergy de-labelling has been identified as a key initiative to improve antibiotic prescribing and antimicrobial stewardship. The aim of this document is to guide best practice to support the identification and removal of penicillin allergy labels in patients who have not experienced a true hypersensitivity reaction
3.	Evidence and background information considered. For example: • population data • staff and service users' data, as applicable • needs assessment • engagement and involvement findings • research • good practice guidelines • participant knowledge • list of stakeholders and how stakeholders have engaged in the development stages • comments from those involved in the designing and development stages	About 6% of the UK general population have a penicillin allergy label on their record. Evidence indicates that more than 90% of patients labelled with a penicillin allergy are not allergic to penicillin and associated beta-lactams when formally assessed. In many cases the allergy label may be due to an adverse reaction affecting the gastrointestinal system or a skin rash that occurred during a course of penicillin in childhood. In addition, many patients' reactions to penicillin occurred over 10 years ago and details of the reaction are not recalled or clearly documented. The PHW Human Health Delivery Group primary care workstream has acknowledged that removing false penicillin allergy is a key intervention to enable achievement of the improvement goals set out by the <i>Welsh Health Circular (2024)038 – Healthcare associated infections and antimicrobial resistance goals 2024 to 2025</i> and would contribute to the UK national action plan <i>Confronting antimicrobial resistance 2024 to 2029</i> .



	Population pyramids are available from Public Health Wales Observatory.	The document was developed by PHW History Based Penicillin Allergy De-labelling Task & Finish Group and will comprise a standard evidence-based tool for healthcare professionals to review patient with penicillin allergy label appropriately, a consistent all Wales approach to recording penicillin allergy de-labelling and a patient information leaflet to support shared decision making.
4.	Who will this project affect?	This guidance would be relevant to all prescribers, pharmacists, pharmacy technicians, GPs, out of hours/111 workers, nurses, Welsh ambulance teams, community pharmacists, patients and the general public. This guidance can be used by any registered healthcare professional and in any settings where penicillin allergy history taking or reconciliation is conducted.

5. EQIA – How will the project impact on people?

Questions in this section relate to the impact on people based on the 'protected characteristics' of the Equality Act 2010, and other factors.

How will the project impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by).
5.1 Age For most purposes, the main categories are people aged: • under 18 years; • between 18 and 65 years; • over 65 years.	Inclusion criteria state adult patients ≥18 years old who have a low risk for true penicillin allergy, providing no exclusion criteria met. We expect the guidance being developed to have a positive impact on the health and well-being of adults within Wales who believe they have a penicillin allergy. Children will not be included at this stage, as there is a different set of criteria and evidence for this age group	N/A	N/A



How will the project impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by).
	We do not expect that this guidance will affect individuals unequally based on their age.		
5.2 Persons with a disability as defined in the Equality Act 2010 Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes.	People with learning disabilities, dyslexia or visual impairments may require patient information to be provided in more accessible, understandable formats. Patient information leaflets will be produced in easy-read formats.	All related documents published on the AWTTC website will meet accessibility requirements.	
5.3 People of different genders: Consider men, women, people undergoing gender reassignment. N.B. Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Sometimes referred to as Trans or Transgender.	We do not expect a potential negative, or unequal, impact on people based on their gender, or on people undergoing gender reassignment.	N/A	N/A
5.4 People who are married or who have a civil partner.	We do not expect a potential negative, or unequal, impact on people based on their marital status or being in a civil partnership.	N/A	N/A
5.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding. They are protected for 26 weeks after having a baby whether or not they are on maternity leave.	We do not expect a potential negative, or unequal, impact on women who are expecting a baby, are breastfeeding, or are on a break from work after having a baby.	N/A	N/A



How will the project impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by).
5.6 People based on race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies and travellers, migrant workers. The Runnymede Trust	We do not expect a potential negative, or unequal, impact on people according to their race, nationality, colour, culture or ethnic origin.	N/A	N/A
5.7 People with a religion or belief or with no religion or belief. The term 'religion' includes a religious or philosophical belief. Implications of religious beliefs on selection of medicines (BMJ) In practice: guidance on religion, personal values and beliefs (General Pharmaceutical Council)	We do not expect a potential negative, or unequal, impact on people who have a religion or belief, or people with no religion of belief.	N/A	N/A
5.8 People who are attracted to other people of: • the opposite sex (heterosexual); • the same sex (lesbian or gay); • both sexes (bisexual). Stonewall	We do not expect a potential negative, or unequal, impact on people based on who they are attracted to.	N/A	N/A
5.9 People who communicate using the Welsh language in terms of correspondence, information leaflets, or service plans and design.	We do not expect a potential negative, or unequal, impact on people who communicate using the Welsh language.	Any patient-facing materials will be produced in Welsh and English, in line with the Welsh language standards, including easy read booklets.	



How will the project impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by).
5.10 People according to their income related group.	We do not expect a potential negative, or unequal, impact on people based on their income-related group.	N/A	N/A
5.11 People according to where they live.	We do not expect a potential negative, or unequal, impact on people based on where they live.	N/A	N/A
5.12 Consider others who face health inequalities, such as: • Looked after and accommodated children and young people • Carers: paid/unpaid, family members • People who are homeless or those who experience homelessness: people on the street; those staying temporarily with friends/family; those in hostels/B&Bs • People involved in the criminal justice system: offenders in prison or on probation, ex-offenders • People with addictions and substance misuse problems • People who have poor literacy • People living in remote, rural and island locations	We expect the associated guidance being developed to have a positive impact on the health and well-being of adults living in Wales. We do not expect that this guidance will affect individuals unequally based on health inequalities.	N/A	N/A
5.13 Consider any other groups and risk factors relevant to this project.	N/A	N/A	N/A

6.0 HIA – How will the project impact on the health and wellbeing of people in Wales and help address inequalities in health?

Questions in this section relate to the impact on the overall health of individual people, and the impact on the population in Wales.

How will the project impact on, or affect:	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Actions taken (and who by)
6.1 People being able to access the service offered.	We do not expect a potential negative, or unequal, impact on people's ability to access the service offered.	N/A	N/A
6.2 People being able to improve or maintain healthy lifestyles.	We do not expect a potential negative, or unequal, impact on people's ability to improve or maintain healthy lifestyles.	N/A	N/A
6.3 People in terms of their income and employment status.	We do not expect a potential negative, or unequal, impact on people in terms of their income and employment status.	N/A	N/A
6.4 People in terms of their use of the physical environment.	We do not expect a potential negative, or unequal, impact on people's use of the physical environment.	N/A	N/A
6.5 People in terms of social and community influences on their health.	We do not expect a potential negative, or unequal, impact on people in terms of social and community influences on their health.	N/A	N/A
6.6 People in terms of macro-economic, environmental and sustainability factors.	We do not expect a potential negative, or unequal, impact on people in terms of macroeconomic, environmental and sustainability factors.	N/A	N/A

7.0 Please fill in section 7.1 after completing the EqHIA, and fill in the action plan.

7.1 Please summarize the potential positive and/or negative impacts of the project.	We expect the guidance being developed to have a positive impact on the health and well-being of adults living in Wales, guiding best practice to support the identification and removal of penicillin allergy labels in patients who do not have a true hypersensitivity reaction.
--	---

Action plan for mitigation or improvement and implementation

	Action	Lead(s)	Timescale	Actions taken (state who by)
7.2 What are the key actions identified as a result of completing the EqHIA?	All related documents published on the AWTTC website will meet accessibility requirements. Any patient-facing materials will also be produced as easy-read booklets in Welsh and English.	AWTTC	Prior to publication	
7.3 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment needed?	No	N/A	N/A	N/A
7.4 What are the next steps?	Review guidance in 3 years	AWTTC	May 2029	
7.5 Review of project and EqHIA	TBC	AWTTC	Ongoing	

AWTTC's EqHIA template is adapted from the Cardiff & Vale University Health Board EHIA template.