

Equality and Health Impact Assessment

Urgent Requests for Repeat Medication – Guidance for healthcare professionals providing NHS 111 and out-of-hours primary care services

AWTTC will fill in an Equality and Health Impact Assessment (EqHIA) 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: 29/05/25

1.	AWTTC contact details	Tel: 02921 826900 Email: awttc@wales.nhs.uk
2.	State the objectives of the project.	The purpose of this document is to provide guidance to healthcare professionals when assessing the clinical need and urgency of requests from patients for repeat medication. The guidance is relevant to healthcare professionals working as prescribers in NHS 111 and out-of-hours (OOH) primary care services. Other healthcare professionals such as community pharmacists providing an Emergency Medicine Supply service may also find the clinical guidance useful. It is anticipated that this guidance will enable healthcare professionals to assess need and prioritise requests for urgent medication, thereby increasing availability of GP OOH appointments for symptomatically unwell patients and minimising medicines wastage.
3.	Evidence and background information considered. For example: <ul style="list-style-type: none"> • population data • staff and service users' data, as applicable • needs assessment • engagement and involvement findings 	Urgent requests for repeat medication arise when patients who would typically receive repeat prescriptions are unable to access their GP surgery, for example, while away on holiday or during weekends. Many community pharmacies across Wales are commissioned to provide an Emergency Medicine Supply service and should be used by patients in the first instance to obtain urgent repeat medication. Data from Welsh Government indicated



	<ul style="list-style-type: none">• 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 <p>Population pyramids are available from Public Health Wales Observatory.</p>	<p>that the Emergency Medicine Supply service was used on approximately 100,000 occasions during 2023–2024.</p> <p>Where community pharmacies are not able to provide an emergency supply of a medication, NHS 111 and OOH primary care services can be contacted. These requests represent a major burden to NHS 111 and OOH primary care services. Data provided by NHS 111 in Wales indicate that requests for repeat medication made outside of GP hours accounted for just under 2,000 phone calls to the service between January and September 2024. Handling requests for urgent repeat medication is time consuming, can reduce availability of GP OOH appointments and can disrupt usual prescribing and dispensing practices, leading to possible medicines wastage. However, omission of medication may lead to patient harm from loss of disease control and withdrawal effects.</p> <p>The project document has been developed in collaboration with NHS 111.</p> <p>The guidance has drawn on or signposted to advice from a range of sources including the SPS, emc, BNF, BNFC, MHRA, NHS, NICE, Medicines for Children, Epilepsy Society, FPA, Faculty of Sexual and Reproductive Healthcare, the Oral Anticoagulant Record, Parkinson’s UK, Royal Osteoporosis Society.</p>
<p>4.</p>	<p>Who will this project affect?</p>	<p>This project will affect healthcare professionals and people making urgent requests for repeat medication, as well as other NHS 111 and GP OOH users who might experience increased availability of NHS services as a result of implementation of the guidance.</p>

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).
<p>5.1 Age For most purposes, the main categories are people aged:</p> <ul style="list-style-type: none"> • under 18 years; • between 18 and 65 years; • over 65 years. 	<p>We do not expect a potential negative, or unequal, impact on people based on their age.</p> <p>[Note: For prescription medicines we expect the prescriber to have prescribed or advised their use within the terms of their UK marketing authorisations. Healthcare professionals should take note of the contraindications, warnings, safety recommendations and any monitoring needs for the medicine. These are explained in the Summary of Product Characteristics (SmPC) for the medicine or the British National Formulary [add links]. Healthcare professionals should follow relevant professional guidance and take full responsibility for the decision when prescribing or advising the use of off-label or unlicensed medicines. This includes considering the contraindications, warnings, monitoring requirements and other</p>	<p>N/A</p>	<p>N/A</p>



How will the project impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by).
	safety recommendations for the medicine (MHRA guidance on off-label or unlicensed use of medicines)]		
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.	We do not expect a potential negative, or unequal, impact on people with a disability.	All related documents published on the AWTTC website will meet accessibility requirements.	N/A
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	We do not expect a potential negative, or unequal, impact on women who are expecting a baby,	Prescribers should take account of the Summary of Product Characteristics	The SmPC criteria specify which people are excluded from treatment due to the



How will the project impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by).
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.	are breastfeeding, or are on a break from work after having a baby.	(SmPC) when prescribing any medicines for women who are pregnant, or who are breastfeeding.	associated risks of treatment. This will be identified for consideration of any change to the advice at the next review if there is a change to the current advice for pregnant and breastfeeding women.
5.6 People of a different 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 of a different race, nationality, colour, culture or ethnic origin. People of different race and ethnicities can have varying responses to medicines.	Note in the project document that people of different race and ethnicities can have varying responses to medicines where relevant.	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. Some medicines are made from certain animal products and people might not want to take them because of religion or belief.	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).
5.8 People who are attracted to other people of: <ul style="list-style-type: none">• 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.	N/A	N/A
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. In Wales, all prescription medicines are free-of-charge for patients; positive recommendations through this project will not affect people depending 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



How will the project impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by).
5.12 Consider others who face health inequalities, such as: <ul style="list-style-type: none">• 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 do not expect a potential negative, or unequal, impact on people who face 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. 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.	The guidance may reduce medicines wastage by reducing supply of unnecessary medicines, leading to positive economic and sustainability impacts.	N/A	N/A

7. 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.	This project aims to ensure appropriate access to medicines outside normal working hours, irrespective of protected characteristics.
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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?	N/A	N/A	N/A	N/A
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?	<p>Discuss at the All Wales Prescribing Advisory Group meeting</p> <p>Send the document and EqHIA to consultation.</p> <p>Discuss updated document with AWPAG</p> <p>All Wales Medicines Strategy Group to review and endorse document</p>	<p>AWTTC</p> <p>AWTTC</p> <p>AWTTC</p> <p>AWTTC</p>	<p>December 2024</p> <p>January 2025</p> <p>March 2025</p> <p>May 2025</p>	<p>AWTTC make changes to the document after consultation</p> <p>AWTTC make changes to the document after AWPAG meeting</p> <p>AWMSG endorsed the document</p>



	Action	Lead(s)	Timescale	Actions taken (<i>state who by</i>)
	Publish document	AWTTC	June 2025	AWTTC
7.5 Review of project and EqHIA		AWTTC	TBC	

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