



Department of
Health

An Roinn Sláinte

Mánnystrie O Poustie

www.health-ni.gov.uk

Equality Screening, Disability Duties and Human Rights Assessment Template

CONSULTATION ON PHARMACY PREMISES FEES IN NORTHERN IRELAND

2026

Part 1. Policy scoping

1.1 Information about the policy

Name of the policy:

Pharmacy Premises Fees in Northern Ireland.

Is this an existing, revised or a new policy?

Pharmacy Premises Fees are the Pharmaceutical Society of Northern Ireland's (the regulator for the pharmacy profession), primary source of income. The aim of this policy is to increase the current level of pharmacy premises fees in NI, which have not increased since 2011. The Department is consulting on several options to increase the fees and following consultation analysis if an increase is agreed, The Medicines (Pharmacies) (Applications for Registration and Fees) Regulations (Northern Ireland) 2010 (the 2010 Regulations) will need revised to reflect any change in Premises Fees.

What is it trying to achieve? (intended aims/outcomes)

Under section 129(6) of the Medicines Act 1968 it is the responsibility of the DoH to consult with interested organisations, which includes current registered premises owners, when setting Premises Fees. An increase in the current level of pharmacy Premises Fees would generate additional income that could be used to alleviate current financial pressures facing the Society and enable it to provide the high-quality service that pharmacists, patients, and the public expect of a Regulator. Gathering the views of registered pharmacies will put the Department in the best possible position to inform the Minister about the options available to him to address the rising costs and challenging financial constraints.

* Calculated using the 2% standard bank of England inflation target rate, which is the target rate that the bank aim to achieve for each year. It is acknowledged that the actual inflation impact in these years may be higher/lower than forecast. If necessary, adjustment will be made for the 2030 fee amounts.

Are there any Section 75 categories which might be expected to benefit from the intended policy?

If so, explain how.

There are no Section 75 categories which are likely to benefit directly from an increase in Pharmacy Premises Fees.

Who initiated or wrote the policy?

The Department of Health (NI)

Who owns and who implements the policy?

The Department of Health (NI)

1.2 Implementation factors

Are there any factors which could contribute to/detract from the intended aim/outcome of the policy/decision?

Yes

If yes, are they (please delete as appropriate)

While any Pharmacy Premises Fee increase would benefit the Society by increasing its additional revenue, Premises Fees have not increased since 2011, therefore any amount of increase in Premises Fees may be challenged at this time by pharmacy businesses.

1.3 Main stakeholders affected

Who are the internal and external stakeholders (actual or potential) that the policy will impact upon? (please delete as appropriate)

Staff

Service users

Other public sector organisations

Voluntary/community/trade unions

Other, please specify

1.4 Other policies with a bearing on this policy

Policy	Owner(s) of the policy

1.5 Available evidence

What evidence/information (both qualitative and quantitative*) have you gathered to inform this policy? Specify details for each of the Section 75 categories.

According to the [General Pharmaceutical Services for Northern Ireland: Annual Statistics 2024/25](#) report, at UK level, NI has the highest number of pharmacies per 100,000 population for 2023/24 at 26.7 pharmacies per 100, population. In comparison, the UK average is 19.2 pharmacies per 100,000 people. This difference may be explained by the fact that there are fewer dispensing GP practices in NI.

The same report also highlights that over 99.4% of the population is living within 5 miles of a pharmacy. However, in many cases, the distance between home and pharmacy was far shorter - 72.5% of all people lived within 1 mile of a pharmacy.

The mid-year NI population estimates produced by the NI Statistics and Research Agency for 2024 indicate a 1.92 million¹ NI population. Each of the Section 75 categories is considered below however, the Department is of the view that the implementation of an increase in pharmacy Premises Fees does not have the potential to impact a particular Section 75 category of the total NI population, but will impact on pharmacy businesses that are required to pay these fees in order to continue to operate.

Section 75 category	Details of evidence/information
Religious belief	There is no qualitative or quantitative evidence available in relation to the religious beliefs of those who are currently using pharmacy premises. The policy proposal to increase pharmacy premises fees affects all pharmacy businesses that are responsible for paying these fees, not the service users, irrespective of religious belief.
Political opinion	There is no qualitative or quantitative evidence available in relation to the political opinion of those who are currently using pharmacy services. The policy proposal to increase pharmacy premises fees affects all pharmacy businesses that are responsible for paying these fees, not the

¹ [Mid-Year Population Estimates | Northern Ireland Statistics and Research Agency \(nisra.gov.uk\)](#)

	<p>service users, irrespective of political opinion.</p>
Racial group	<p>There is no qualitative or quantitative evidence available in relation to the racial group of those who are currently using pharmacy premises.</p> <p>The policy proposal to increase pharmacy premises fees affects all pharmacy businesses that are responsible for paying these fees, not the service users, irrespective of racial grouping.</p>
Age	<p>There is no qualitative or quantitative evidence available in relation to the age of those who are currently responsible for paying pharmacy premises fees.</p> <p>The policy proposal to increase pharmacy premises fees affects all pharmacy businesses that are responsible for paying these fees, not the service users, irrespective of age.</p>
Marital status	<p>There is no qualitative or quantitative evidence available in relation to the marital status of those individuals who currently pay pharmacy premises fees.</p> <p>The policy proposal to increase pharmacy premises fees affects all pharmacy businesses that are responsible for paying these fees, not the service users, irrespective of marital status.</p>
Sexual orientation	<p>There is no qualitative or quantitative evidence available in relation to the sexual orientation of those who pay pharmacy premises fees.</p> <p>The policy proposal to increase pharmacy premises fees affects all pharmacy businesses that are responsible for paying these fees, not the service users, irrespective of sexual orientation.</p>
Gender (Men and women generally)	<p>There is no qualitative or quantitative evidence available in relation to the gender of those individuals who currently pay pharmacy premises fees.</p> <p>The policy proposal to increase pharmacy premises fees affects all pharmacy businesses that are responsible for paying these fees, not the service users, irrespective of gender.</p>
Dependants (with or	<p>There is no qualitative or quantitative evidence available in relation whether the individuals who currently pay pharmacy premises fees have</p>

without)	dependents or not. The policy proposal to increase pharmacy premises fees affects all pharmacy businesses that are responsible for paying these fees, not the service users, irrespective of having dependents or not.
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* **Qualitative data** – refers to the experiences of individuals related in their own terms, and based on their own experiences and attitudes. Qualitative data is often used to complement quantitative data to determine why policies are successful or unsuccessful and the reasons for this.

Quantitative data - refers to numbers (that is, quantities), typically derived from either a population in general or samples of that population. This information is often analysed either using descriptive statistics (which summarise patterns), or inferential statistics (which are used to infer from a sample about the wider population).

1.6 Needs, experiences and priorities

Taking into account the information recorded in 1.1 to 1.5, what are the different needs, experiences and priorities of each of the following categories, in relation to the particular policy/decision? Specify details for each of the Section 75 categories

Section 75 category	Details of needs/experiences/priorities
Religious belief	The policy proposal to increase pharmacy Premises Fees will affect all those responsible for paying the fees, not the service users. There is no evidence to suggest that different religions will have any different needs, experiences, priorities or issues in relation to the policy proposal.
Political opinion	The policy proposal to increase pharmacy Premises Fees will affect all those responsible for paying the fees, not the service users. There is no evidence to suggest that those with different political opinions will have any different needs, experiences, priorities or issues in relation to the policy proposal.
Racial group	The policy proposal to increase pharmacy Premises Fees will affect all those responsible for paying the fees, not the service users. There is no evidence to suggest that different racial groups will have any different needs, experiences, priorities or issues in relation to the policy proposal.
Age	The policy proposal to increase pharmacy Premises Fees will affect all those responsible for paying the fees, not the service users. There is no evidence to suggest that different age groups will have any different needs, experiences, priorities or issues in relation to the policy proposal.

Section 75 category	Details of needs/experiences/priorities
Marital status	The policy proposal to increase pharmacy Premises Fees will affect all those responsible for paying the fees, not the service users. There is no evidence to suggest there will be any different needs, experiences, priorities or issues in relation to the policy proposal based on marital status.
Sexual orientation	The policy proposal to increase pharmacy Premises Fees will affect all those responsible for paying the fees, not the service users. There is no evidence to suggest there will be any different needs, experiences, priorities or issues in relation to the policy proposal based on sexual orientation.
Gender (Men and women generally)	The policy proposal to increase pharmacy Premises Fees will affect all those responsible for paying the fees, not the service users. There is no evidence to suggest there will be any different needs, experiences, priorities or issues in relation to the policy proposal based on gender.
Disability (with or without)	The policy proposal to increase pharmacy Premises Fees will affect all those responsible for paying the fees, not the service users. There is no evidence to suggest there will be any different needs, experiences, priorities or issues in relation to the policy proposal based on disability status.
Dependants (with or without)	The policy proposal to increase pharmacy Premises Fees will affect all those responsible for paying the fees, not the service users. There is no evidence to suggest that those with and those without dependants will have any different needs, experiences, priorities or issues in relation to the policy proposal.

Part 2. Screening questions

2.1 What is the likely impact on equality of opportunity for those affected by this policy, for each of the Section 75 equality categories? (minor/major/none)		
Section 75 category	Details of policy impact	Level of impact? minor/major/none
Religious belief	No impact on equality of opportunity has been identified for those affected by the policy proposals.	None.
Political opinion	No impact on equality of opportunity has been identified for those affected by these policy proposals.	None.
Racial group	No impact on equality of opportunity has been identified for those affected by the policy proposals.	None.
Age	No impact on equality of opportunity has been identified for those affected by the policy proposals.	None.
Marital status	No impact on equality of opportunity has been identified for those affected by this policy proposal.	None.
Sexual orientation	No impact on equality of opportunity has been identified for those affected by this policy proposal.	None.
Gender (Men and women generally)	No impact on equality of opportunity has been identified for those affected by the policy proposals.	None.
Disability (with or without)	No impact on equality of opportunity has been identified for those affected by the policy proposals.	None.
Dependants (with or without)	No impact on equality of opportunity has been identified for those affected by this policy proposal.	None.

2.2 Are there opportunities to better promote equality of opportunity for people within the Section 75 equalities categories?		
Section 75 category	If Yes, provide details	If No, provide reasons
Religious belief		No. The policy proposal would apply to all those responsible for paying pharmacy Premises Fees, regardless of religious belief.
Political opinion		No. The policy proposal would apply to all those responsible for paying pharmacy Premises Fees, regardless of political opinion.
Racial group		No. The policy proposal would apply to all those responsible for paying pharmacy Premises Fees, regardless of racial group.
Age		No. The policy proposal would apply to all those responsible for paying pharmacy Premises Fees, regardless of age.
Marital status		No. The policy proposal would apply to all those responsible for paying pharmacy Premises Fees, regardless of marital status.
Sexual orientation		No. The policy proposal would apply to all those responsible for paying pharmacy Premises Fees, regardless of sexual orientation.
Gender (Men and women generally)		No. The policy proposal would apply to all those responsible for paying pharmacy Premises Fees, regardless of gender.
Disability (with or without)		No. The policy proposal would apply to all those responsible for paying pharmacy Premises Fees, regardless of disability status.
Dependants (with or without)		No. The policy proposal would apply to all those responsible for paying pharmacy Premises Fees, whether having dependents or not.

2.3 To what extent is the policy likely to impact on good relations between people of different religious belief, political opinion or racial group? (minor/major/none)		
Good relations category	Details of policy impact	Level of impact minor/major/none
Religious belief		None.
Political opinion		None.
Racial group		None.

2.4 Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?		
Good relations category	If Yes , provide details	If No , provide reasons
Religious belief		No. The policy proposal would apply to all those responsible for paying these fees, irrespective of religious belief.
Political opinion		No. The policy proposal would apply to all those responsible for paying these fees, irrespective of political opinion.
Racial		No. The policy proposal would apply to all those responsible for paying these fees, irrespective of

group		racial grouping.
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2.5 Additional considerations

Multiple identity

Generally speaking, people can fall into more than one Section 75 category.

Taking this into consideration, are there any potential impacts of the policy/decision on people with multiple identities? *(For example; disabled minority ethnic people; disabled women; young Protestant men; and young lesbians, gay and bisexual people).* **Provide details of data on the impact of the policy on people with multiple identities. Specify relevant Section 75 categories concerned.**

N/A - The policy is more likely to impact pharmacy businesses, not service users.

2.6 Was the original policy / decision changed in any way to address any adverse impacts identified either through the screening process or from consultation feedback. If so, please provide details.

No as an increase in pharmacy Premises Fees would affect all those responsible for paying the fees, not the service users.

Part 3. Screening decision

3.1 Would you summarise the impact of the policy as; No Impact/ Minor Impact/ Major Impact?

No impact

Minor impact

Major impact

✓

Consider mitigation (3.4 – 3.5)

3.2 Do you consider that this policy/ decision needs to be subjected to a full equality impact assessment (EQIA)?

Yes - screened in
No - screened out

<input type="checkbox"/>
<input checked="" type="checkbox"/>

3.3 Please explain your reason.

An increase in pharmacy Premises Fees would affect all those responsible for paying the fees, not the service users.

introduction of an alternative policy to better promote equality of opportunity or good relations.

Can the policy/decision be amended or changed or an alternative policy introduced to better promote equality of opportunity and/or good relations?

Yes
No

<input checked="" type="checkbox"/>
<input type="checkbox"/>

If so, give the reasons to support your decision, together with the proposed changes/amendments or alternative policy.

As noted above, it is not envisaged that the introduction of an increase in pharmacy Premises Fees will have any adverse effects on service users.

3.5 Timetabling and prioritising (not applicable as screened out)

Factors to be considered in timetabling and prioritising policies for equality impact assessment.

If the policy has been 'screened in' for equality impact assessment, then please answer the following questions to determine its priority for timetabling the equality impact assessment.

On a scale of 1-3, with 1 being the lowest priority and 3 being the highest, assess the policy in terms of its priority for equality impact assessment.

Effect on equality of opportunity and good relations – **Rating _1_ (1-3)**

Social need – **Rating _1_ (1-3)**

Effect on people’s daily lives – **Rating _1_ (1-3)**

Relevance to a public authority’s functions – **Rating _1_ (1-3)**

Note: The Total Rating Score should be used to prioritise the policy in rank order with other policies screened in for equality impact assessment. This list of priorities will assist the public authority in timetabling. Details of the Public Authority’s Equality Impact Assessment Timetable should be included in the quarterly Screening Report.

Is the policy affected by timetables established by other relevant public authorities?

If yes, please provide details.

Part 4. Monitoring

Monitoring is an important part of policy development and implementation. Through monitoring it is possible to assess the impacts of the policy / decision both beneficial and adverse.

4.1 Please detail how you will monitor the effect of the policy / decision?

Information gathered in the development of the consultation and during the consultation will be used to assess any negative impacts that a fee increase may have.

Furthermore, if an increase in pharmacy Premises Fees is applied, the Society would be required to monitor the possible negative impact of the policy on the provision of pharmacy services.

4.2 What data will you collect in the future in order to monitor the effect of the policy / decision?

By liaison with the Society

Please note: - For the purposes of the annual progress report to the Equality Commission you may later be asked about the monitoring you have done in relation to this policy and whether that has identified any Equality issues.

Part 5. Disability Duties

5.1 Does the policy/decision in any way promote positive attitudes towards disabled people and/or encourage their participation in public life?

No. The policy proposal does not directly promote positive attitudes towards disabled people, nor does it discourage people with a disability from participating in public life.

5.2 Is there an opportunity to better promote positive attitudes towards disabled people or encourage their participation in public life by making changes to the policy/decision or introducing additional measures?

Given the nature of the policy, we have identified no opportunities to promote positive attitudes towards disabled people or encourage their participation in public life by changing or introducing additional measures to the policy proposal.

Part 6. Human Rights

6.1 Does the policy / decision affects anyone's Human Rights?

ARTICLE	Likely Policy Impact		
	POSITIVE IMPACT	NEGATIVE IMPACT = human right interfered with or restricted	NEUTRAL IMPACT
Article 2 – Right to life			✓
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment			✓
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour			✓
Article 5 – Right to liberty & security of person			✓
Article 6 – Right to a fair & public trial within a reasonable time			✓
Article 7 – Right to freedom from retrospective criminal law & no punishment without law.			✓
Article 8 – Right to respect for private & family life, home and correspondence.			✓
Article 9 – Right to freedom of thought, conscience & religion			✓
Article 10 – Right to freedom of expression			✓
Article 11 – Right to freedom of assembly & association			✓
Article 12 – Right to marry & found a family			✓
Article 14 – Prohibition of discrimination in the enjoyment of the convention rights			✓
1st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			✓
1st protocol Article 2 – Right of access to education			✓

6.2 If you have identified a likely negative impact who is affected and how?

At this stage we would recommend that you consult with your line manager to determine whether to seek legal advice and to refer to Human Rights Guidance to consider:

- *whether there is a law which allows you to interfere with or restrict rights*
- *whether this interference or restriction is necessary and proportionate*
- *what action would be required to reduce the level of interference or restriction in order to comply with the Human Rights Act (1998).*

6.3 Outline any actions which could be taken to promote or raise awareness of human rights or to ensure compliance with the legislation in relation to the policy/decision.

Not applicable.

Part 7 - Approval and authorisation

Screened by:	Position/Job Title	Date
Isobel Riddell	DP	30/4/2026 (revised 3/6/26)
Approved by:		
Brenda McGilligan Gillian Wright	G7	30/4/26 (revised 3/6/26)
Copied to EHRU:		

The Screening Template is 'signed off' and approved by a senior manager responsible for the policy (at least Grade 7), made easily accessible on the public authority's website as soon as possible following completion and made available on request.

ADDITIONAL INFORMATION TO INFORM THE ANNUAL PROGRESS REPORT TO THE EQUALITY COMMISSION

(PLEASE NOTE: THIS IS NOT PART OF THE SCREENING TEMPLATE BUT MUST BE COMPLETED AND RETURNED WITH THE SCREENING)

1. Please provide details of any measures taken to enhance the level of engagement with individuals and representative groups. Please include any use of the Equality Commissions guidance on consulting with and involving children and young people.

The Department of Health (NI) is undertaking a consultation with key stakeholders on options to increase pharmacy Premises Fees. In developing the consultation, the Department formally engaged with the Society and Community Pharmacy NI.

2. In developing this policy / decision were any changes made as a result of equality issues raised during :
 - (a) pre-consultation / engagement;
 - (b) formal consultation;
 - (c) the screening process; and/or
 - (d) monitoring / research findings.

If so, please provide a brief summary including how the issue was identified, what changes were made, and what will be the expected outcomes / impacts for those effected.

NA

3. Does this policy / decision include any measure(s) to improve access to services including the provision of information in accessible formats? If so please provide a short summary.

N/A

Thank you for your co-operation.
Equality and Human Rights Unit.