# NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE

# GUIDELINES EQUALITY IMPACT ASSESSMENT FORM SCOPING

As outlined in the Guidelines Manual, NICE has a duty to take reasonable action to avoid unlawful discrimination and promote equality of opportunities. The purpose of this form is to document that equalities issues have been considered in reaching the final scope for a clinical guideline. Please refer to the 'Positively equal guide' for further information on questions to be considered during scoping.

Taking into account each of the equality characteristics below the form needs:

- To confirm that equality issues have been considered at every stage of the scoping (from drafting the key clinical issues, stakeholder involvement and wider consultation to the final scope)
- Where groups are excluded from the scope, to comment on any likely implications for NICE's duties under equality legislation
- To highlight planned action relevant to equalities.

This form is completed by the Short Clinical Guidelines Programme Associate Director and the Guideline Development Group (GDG) Chair for each guideline and submitted with the final scope for sign off by the Chair of the Guidelines Review Panel (GRP) and the lead from the Centre for Clinical Practice.



# **EQUALITY CHARACTERISTICS**

#### Age

- Older people
- · Children and young people
- · Young adults

Definitions of age groups may vary according to policy or other context

#### Religion or belief

- Religions (e.g. Christian; Muslim; Hindu; Jewish; Sikh; Buddhist)
- Denominations or sects within a religion (e.g. Jehovah's Witness; Sufi)
- Structured philosophical belief (e.g. atheism; humanism)
- Lack of religion or belief

## Disability

- Sensory
- Learning disability
- Mental health
- Cognitive
- Mobility

#### Sexual orientation

- Lesbians
- Gay men
- Bisexual people

#### **Ethnicity**

Asian or Asian British Black or black British People of mixed ethnicity Irish White British Chinese

#### Socio-economic status

Depending on specific policy context, this may include factors such as:

- Social exclusion and deprivation associated with geographical areas (e.g. the Spearhead Group of local authorities and PCTs, neighbourhood renewal fund areas).
- Inequalities associated with other geographical distinctions (e.g. the North/South divide, urban versus rural).
- Inequalities in income, education, health, housing, crime rates or other factors associated with socioeconomic disadvantage.

### Gender

- Women
- Men

#### Other categories

- Refugees and asylum seekers
- Migrant workers
- · Looked after children
- Homeless people

# Gender identity

- · Transsexual people
- Transgendered people

This list is illustrative rather than comprehensive. These groups are not specifically protected under current or forthcoming legislation, but it is good practise to consider their needs. From a legal perspective, people in these groups are likely to fall within one or more of the categories that are specifically protected.

# GUIDELINES EQUALITY IMPACT ASSESSMENT FORM: SCOPING

Guideline title: Sickle cell acute episode: management of an acute painful sickle cell episode in hospital.

1. Have relevant equality issues been No equality issues were identified during s			iven to:
<ul> <li>Pregnant women as management are safe to use during pregnancy.</li> </ul>	may vary to ensure that	they are treated	with medications that
Children as they will follow a different	ent pathway from that of	adults.	
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2. If there are exclusions listed in the settings) are these justified?	e scope (for example	e, populations,	treatments or
• None			
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X			
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3.	Have relevant bodies and stakeholders been consulted?				
•	Yes. We held a stakeholder workshop where representatives from relevant stakeholder groups attended, including the Sickle Cell Society. The scope was distributed to the wider stakeholder population for full consultation.				
•	<ul> <li>All relevant comments from the stakeholder supported our identified equality issues – no others we raised.</li> </ul>				