NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE guidelines

Equality impact assessment

Upper airways tract cancers: assessment and management of upper airways tract cancers

The impact on equality has been assessed during guidance development according to the principles of the NICE equality policy.

1.0 Scope: before consultation (To be completed by the developer an	d
submitted with the draft scope for consultation)	

1.1	Have any potential equality issues been identified during the development of
	the draft scope, before consultation, and, if so, what are they?

No equalities issues have been identified.

1.2 What is the preliminary view on the extent to which these potential equality issues need addressing by the Committee? For example, if population groups, treatments or settings are excluded from the scope, are these exclusions justified – that is, are the reasons legitimate and the exclusion proportionate?

Exclusion: Adults and young people (16 years and older) with cancer of the thyroid, orbit, middle ear, cutaneous, sun exposed lip, skull base and major salivary gland **Reason:** These sites do not form part of the upper airways tract and have therefore been excluded.

Exclusion: Adults and young people (16 years and older) with sarcoma **Reason:** This population of patients is covered by existing NICE guidance

Exclusion: Adults and young people (16 years and older) with lymphoma **Reason:** The management of patients with lymphoma is different to those with upper airways tract cancers.

Exclusion: Children (under age 16 years) Reason: Their management is provided by the paediatric oncology service
2.0 Scope: after consultation (To be completed by the developer and submitted with the final scope)
2.1 Have any potential equality issues been identified during consultation, and, if so, what are they?
No equalities issues have been identified.
2.2 Have any changes to the scope been made as a result of consultation to highlight potential equality issues?
N/A

related	communication need?		
•	If so, is an alternative version of the 'Information for the Public' document recommended?		
If so, w	If so, which alternative version is recommended?		
The alte	ernative versions available are:		
• la	arge font or audio versions for a population with sight loss;		
• E	British Sign Language videos for a population who are deaf from birth;		
	Easy read' versions for people with learning disabilities or cognitive mpairment.		
N/A			

2.3 Is the primary focus of the guideline a population with a specific disability-

3.0 Guideline development: before consultation (to be completed by the

developer before draft guideline consultation)
3.1 Have the potential equality issues identified during the scoping process been addressed by the Committee, and, if so, how?
No equalities issues that would need to be addressed were identified.
3.2 Have any other potential equality issues (in addition to those identified during the scoping process) been identified, and, if so, how has the Committee addressed them?
No new equality issues have been identified.
3.3 Were the Committee's considerations of equality issues described in the consultation document, and, if so, where?
Consideration of equality issues would have been documented in the Linking Evidence to Recommendations table that accompanies the recommendations for each clinical question. However, the GC did not identify any potential issues.
3.4 Do the preliminary recommendations make it more difficult in practice for a specific group to access services compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?
No
3.5 Is there potential for the preliminary recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?

No		

3.6 Are there any recommendations or explanations that the Committee could make to remove or alleviate barriers to, or difficulties with, access to services identified in questions 3.1, 3.2 or 3.3, or otherwise fulfil NICE's obligation to advance equality?

We do not believe that the recommendations in this guideline should cause any difficulties with accessing services on the grounds of equality.

Completed by Developer National Collaborating Centre for

Cancer

Date 30.07.2015

Approved by NICE quality assurance lead Sarah Willett

Date 20.08.2015

4.0 Final guideline (to be completed by the Developer before GE consideration of final guideline)

4.1 Have any additional potential equality issues been raised during the consultation, and, if so, how has the Committee addressed them?
4.2 If the recommendations have changed after consultation, are there any recommendations that make it more difficult in practice for a specific group to access services compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?
4.3 If the recommendations have changed after consultation, is there potential for the recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?
4.4 If the recommendations have changed after consultation, are there any recommendations or explanations that the Committee could make to remove or alleviate barriers to, or difficulties with, access to services identified in questions 4.2, 4.3 and 4.4, or otherwise fulfil NICE's obligations to advance equality?

4.5 Have the Committee's considerations of equality issues been described in the final guideline document, and, if so, where?
Updated by Developer
Date
Approved by NICE quality assurance lead
Date

5.0 After Guidance Executive amendments – if applicable (To be completed by appropriate NICE staff member after Guidance Executive)

5.1 Outline amendments agreed by Guidance Executive below, if applicable:
Approved by Developer
Date
Approved by NICE quality assurance lead