

# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## EQUALITY IMPACT ASSESSMENT

### NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

#### NICE guidelines

#### Equality impact assessment

#### Dementia

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

#### **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 equality issues specific to review question one (initiation and review of Donepezil, Rivastigmine, Galantamine and Memantine for people with Alzheimer's Disease) were identified during the scoping process.

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 further equality issues were identified during the development of review question one.

3.3 Were the Committee's considerations of equality issues described in the consultation document, and, if so, where?

The review protocol is included within the consultation documentation and this reflects the committee's request that people aged 40-64 years, people with a learning disability and people with comorbidities should be considered when the available evidence was reviewed. However, no evidence relating to any of these groups was identified.

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?

The preliminary recommendations are expected to improve access to appropriate treatment for Alzheimer's Disease, by extending the settings in which specified drugs can be initiated. Therefore it is not anticipated that the draft recommendations will make it more difficult for any specific groups to access treatment.

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?

It is not believed that the preliminary recommendations would have an adverse impact of people with disabilities.

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?

The committee were not aware of any specific barriers to access for particular groups, in the context of initiation and review of Donepezil, Rivastigmine, Galantamine and Memantine for treatment of Alzheimer's Disease. However, as outlined above, the draft recommendations are expected to improve access overall.

Completed by Developer \_\_\_\_\_ Sue Spiers \_\_\_\_\_

Date \_\_\_\_\_ 4<sup>th</sup> Jan 2016 \_\_\_\_\_

Approved by NICE quality assurance lead \_\_\_\_\_

Date \_\_\_\_\_