

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE guidelines

Equality impact assessment

Babies, children and young people's experience of healthcare

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

Guideline development: before consultation (to be completed by the Developer before consultation on the draft guideline)

3.1 Have the potential equality issues identified during the scoping process been addressed by the Committee, and, if so, how?

When drafting recommendations, the committee has been aware that special considerations may be necessary for certain groups of babies, children and young people. This has been applicable to recommendations on communication, information, support from parents or carers, self-advocacy and independent advocacy, design of and feedback on healthcare services, environment, and access to and continuity of healthcare services.

To ensure effective communication, recommendations include using appropriate forms of communication (for example, Makaton, sign language, use of interpreters or more time). Similarly, recommendations on information provision include the fact that accessible formats and language (for example translated into another language or in an easy read format) and culturally sensitive material should be used.

The recommendations covering support from parents and carers includes recommendations to ensure that babies, children and young people who do not have a parent or carer to support them (for example, those in institutional care, unaccompanied refugees) should be offered support in other ways. The recommendations on self-advocacy make provision for children and young people who may need extra support to self-advocate due to communication difficulties, or assumptions about certain groups of children not being able to advocate for themselves. The recommendations on independent advocates considers their use for children or young people who do not have parents or carers who can adequately

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represent them.

The recommendations on design of healthcare services and measuring experience of healthcare recognise that it is particularly important to obtain feedback from seldom heard and minority groups (for example, black, Asian and minority ethnic groups, people with learning disabilities, people from a disadvantaged background, LGBT+ people, people who have not been able to, or have chosen not to, use the services before) to ensure services are designed to include their needs. Furthermore, obtaining feedback should not be constrained by practical barriers (such as transport, language, travel costs) which may impact more on certain groups of disadvantaged or minority background children and young people, compared to those from a more privileged or less diverse background.

The recommendations on environment take into account that physical accessibility and the availability of adaptations to the environment or equipment are essential to ensure an appropriate environment for all babies, children and young people, including those with disabilities.

The recommendations on access to healthcare include recommendations that access should take into consideration factors such as the religious, cultural or social backgrounds of babies, children and young people. There are also recommendations that certain groups of children and young people (for example, looked after children, children in institutional care, care leavers) may need additional support to access healthcare services. There are also recommendations relating to access for children who live in remote locations, or who would otherwise have difficulty travelling to appointments.

The recommendations on continuity and coordination of care recognise that some groups of children and young people will require additional support to ensure continuity (for example, care leavers, homeless young people, children or young people with complex needs or disabilities).

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, no additional equality issues have been identified.

3.3 Have the Committee's considerations of equality issues been described in the guideline for consultation, and, if so, where?

As detailed above, a number of the recommendations include specific provision for certain groups of children and young people to address equality issues and these have been discussed in the committee's discussion of the evidence in the following evidence reports:

Evidence report B: Communication by healthcare staff

Evidence report D: Providing information

Evidence report F: Involving parents or carers in healthcare and healthcare decisions

Evidence report H: Empowering children and young people to advocate for themselves

Evidence report I: Independent advocacy in healthcare for children and young people

Evidence report K: Design of healthcare services

Evidence report L: Measuring experience

Evidence report M: Healthcare environment

Evidence report O: Accessing healthcare

Evidence report P: Continuity of care

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, the preliminary recommendations do not make it more difficult for a specific group to access services compared to other groups, as where there was potential for this to happen, the recommendations have been written to mitigate this. However, the committee are aware that the mitigations are very general and would not necessarily be detailed enough to target specific minority communities.

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, the preliminary recommendations should not have an adverse impact on people with disabilities, as where there was potential for this to happen, the recommendations have been written to mitigate this.

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 recommendations in the guideline have been written by the committee to take into account the possible barriers to access identified for this population of babies, children and young people.

Completed by Developer: Hilary Eadon

Date: 16th December 2020

Approved by NICE quality assurance lead: Simon Ellis

Date: 25th January 2021