## NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## **EQUALITY IMPACT ASSESSMENT**

## **NICE** guidelines

## Adrenal Insufficiency: acute and long-term management

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

- 1.0 Checking for updates and scope: before scope consultation (to be completed by the Developer and submitted with the draft scope for consultation)
  - 1.1 Is the proposed primary focus of the guideline a population with a specific communication or engagement need, related to disability, age, or other equality consideration? Y/N

If so, what is it and what action might be taken by NICE or the developer to meet this need? (For example, adjustments to committee processes, additional forms of consultation.)

No

1.2 Have any potential equality issues been identified during the check for an update or during development of the draft scope, and, if so, what are they?

(Please specify if the issue has been highlighted by a stakeholder)

- Age: Treatment adherence in young people and particularly during transition to adult services.
- Disabilities: Treatment adherence because of difficulties from cognitive challenges.
  This includes people with a learning disability and mental health conditions.

- Pregnancy and maternity care: Women with adrenal insufficiency were noted as being particularly at risk of adrenal crisis during labour and c-sections.
- Socioeconomic factors. People from lower socioeconomic groups can face challenges accessing healthcare.

Other groups with definable characteristics that would affect treatment adherence and accessing services and medicines include:

- refugees
- asylum seekers
- migrant workers
- people who are homeless
- people in prisons and young offenders (there could be potential issues with access to medicines, particularly when in custody in police stations)
- people in care homes (there could be potential issues with access to medicines).
- 1.3 What is the preliminary view on the extent to which these potential equality issues need addressing by the committee?

It is noted that the groups identified above are important to consider when making recommendations for the guideline. All will be included within the population covered by the reviews. If appropriate, they will be considered as subgroups when the protocols for specific review questions are set. Care will be taken to consider the needs and preferences of these groups when drafting recommendations, particularly when recommendations involve people with adrenal insufficiency directly, such as patient engagement in shared decision making about medicines.

- This guideline will cross refer to <a href="NICE guidelines on patient experience">NICE guidelines on patient experience</a> (CG139), <a href="shared decision making">shared decision making</a> (NG197) and <a href="decision-making and mental capacity">decision-making and mental capacity</a> (NG108) that address communication issues.
- The guidelines that address access to services and issues around treatment adherence include: <u>transition from children's to adults' services for young</u> <u>people using health or social care services</u> (NG43), <u>care and support of</u> <u>people growing older with learning disabilities</u> (NG96), <u>physical health of</u> <u>people in prison</u> (NG57) and managing medicines in care homes (SC1).

Problems with access to healthcare for people from lower socioeconomic groups, refugees, asylum seekers and people who are homeless relate to a wider issue than can be dealt with in this guideline

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Date: 31.01.2022

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Date: 24.01.2022