

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE guidelines

Equality impact assessment

Exceptional review of fetal monitoring recommendations in Intrapartum care: care for healthy women and babies (CG190)

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 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)

No specific equality issues 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?

N/A

Completed by Developer Moira Mugglestone, Guideline Lead, NGA

Date 27 October 2016

Approved by NICE quality assurance lead
Sharon Summers-Ma, Guideline Lead, NICE

Date 03 November 2016

2.0 Checking for updates and scope: after consultation (to be completed by the Developer and submitted with the revised scope)

2.1 Have any potential equality issues been identified during consultation, and, if so, what are they?

No specific equality issues identified

2.2 Have any changes to the scope been made as a result of consultation to highlight potential equality issues?

N/A

2.3 Is the primary focus of the guideline a population with a specific disability-related communication need?

If so, is an alternative version of the 'information for the public' recommended?

If so, which alternative version is recommended?

The alternative versions available are:

- large font or audio versions for a population with sight loss
- British Sign Language videos for a population deaf from birth
- 'Easy read' versions for people with learning disabilities or cognitive impairment.

The primary focus of the guideline is not a population with a specific disability-related communication need

Updated by Developer _____ Moira Mugglestone, Guideline Lead, NGA

Date _____ 27 October 2016

Approved by NICE quality assurance lead
_____ Sharon Summers-Ma, Guideline Lead, NICE

Date _____ 03 November 2016

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?

N/A

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 specific equality issues identified

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

Most review questions included in the update were accompanied by a review protocol published in CG190. In these cases, the CG190 review protocols were adopted for the update and applied to identify, appraise and synthesise evidence. Consideration of equality issues was undertaken for all review questions as part of the development process. For the two review questions that had not been accompanied by a review protocol published in CG190, the review protocols developed for the update included a specific statement capturing the generic principle that equalities considerations would be considered systematically in relation to available evidence and draft recommendations.

When drafting 'evidence to recommendations sections' the Guideline Committee systematically considered the available evidence and its interpretation to formulate draft recommendations. Any specific equality issues identified by the Committee would have been captured under the heading 'Other considerations' in each evidence to recommendations section. No specific issues were identified. However, the Committee's discussion of the following issues is documented in the relevant evidence to recommendations sections and in draft recommendations where appropriate; although none of the issues relates directly to protected characteristics

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

or other specific equality issues they illustrate the extent to which the Committee considered the perspectives of service users in developing the draft recommendations.

- The importance of women being fully informed about clinical procedures that might be undertaken and associated risks and benefits.
- The importance of women feeling as comfortable as possible during clinical procedures.
- The importance of sensitivity with regard to use of terminology used by clinicians in the presence of women (for example, some women might find particular terminology alarming and this might affect their birth experience negatively; in this specific case the Committee concluded that women would generally accept the use of clinically relevant phrases if used in a sensitive manner).
- The importance of communicating with women's birth companion(s) when, for example, explaining why a clinical procedure is being offered.
- The importance of considering women's views and experience as part of future research.

Additionally, while the draft recommendations state that cardiotocography should not be offered routinely on admission to low-risk women in suspected or established labour as part of the initial assessment, a further recommendation was also drafted to promote informed choice as follows.

If a low-risk woman requests cardiotocography as part of the initial assessment:

- discuss the risks and benefits and support her in her choice
- if she is in a setting where cardiotocography is not available, explain that she will need to be transferred to obstetric-led 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

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?

N/A

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