

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

EQUALITY IMPACT ASSESSMENT

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?

Stakeholders noted that people in economically deprived areas are more likely to have a stroke at a younger age. It was also noted that younger patients (<55years) report delays to diagnosis.
Geographical variation will also be taken into account in relation to our recommendations on scanning. Although it is not strictly a protected characteristic, taking this into account will help to support equality of provision.

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

Younger patients are now noted as a group for special consideration in the scope.

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

If so, do the key messages for the public need to be produced in an alternative version?

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.

Does an alternative version(s) of the consultation documents also need to be produced?

Stroke/TIA in the acute phase can affect how people communicate. An easy read version for people with cognitive impairment and a large font version/ audio version for people with sight loss would be helpful.

Updated by Developer: Jennifer Hill

Date: 8/11/2017

Approved by NICE quality assurance lead: Nichole Taske

Date: 04/12/2017