

## **GUIDELINES EQUALITY IMPACT ASSESSMENT FORM: RECOMMENDATIONS**

**Guideline title: Type 1 diabetes in adults**

### **1. Have the equality areas identified in the scope as needing attention been addressed in the guideline?**

Please confirm whether

- the evidence reviews addressed the areas that had been identified in the scope as needing specific attention with regard to equalities issues.  
*Please note this also applies to consensus work in or outside the GDG*
- the development group has considered these areas in their discussions

*Note: some issues of language may correlate with ethnicity; and some communication issues may correlate with disability*

Of the issues considered at scoping:

- The recommendations which have emerged from the evidence favour the use of synthetic insulin rather than those obtained from animal sources.
- The evidence search found no educational programmes aimed at those with language, visual or learning difficulties. The issue of improving uptake and adherence with educational packages was debated by the GDG and forms the basis for one of the main research recommendations.

### **2. Do any recommendations make it impossible or unreasonably difficult in practice for a specific group to access a test or intervention?**

For example:

- Does access to the intervention depend on membership of a specific group?
- Does using a particular test discriminate unlawfully against a group?
- Do people with disabilities find it impossible or unreasonably difficult to receive an intervention?

None of the recommended tests or interventions would be unreasonably difficult for specific groups, with the possible exception of language barriers impacting on benefit from educational packages. The barriers are surmountable with local implementation efforts. As noted above, research into improvements to existing Educational programmes is one of the GDG's research priorities.

**3. Do the recommendations promote equality?**

Please state if the recommendations are formulated so as to promote equalities, for example by making access more likely for certain groups, or by tailoring the intervention to specific groups?

The recommendations make every effort to allow tailoring of interventions to the individual needs and circumstances of people with diabetes



