

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE guidelines

Equality impact assessment

Menopause

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

1.0 Scope: before 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 development of the draft scope, before consultation, and, if so, what are they?

Please see other signed form before consultation of the draft scope.

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?

Please see other signed form before consultation of the draft scope.

Completed by Developer _____ G.Sarri

Date _____ 14.05.2013 _____

Completed by Committee Chair _____ M.A Lumsden

Date _____ 14.05.13 _____

Approved by NICE quality assurance lead

Date _____

2.0 Scope: after consultation (To be completed by the developer and submitted with the final scope)

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

Please see other signed form after consultation of the draft scope.

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

Please see other signed form after consultation of the draft scope.

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' document 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 who are deaf from birth;
- 'Easy read' versions for people with learning disabilities or cognitive impairment.

Please see other signed form after consultation of the draft scope.

Updated by Developer _____ G.Sarri

Date _____ 5.7.2013 _____

Updated by Committee Chair _____ M.A Lumsden

Date _____ 5.7.2013 _____

Approved by NICE quality assurance lead

Date _____

3.0 Guideline development: before consultation (to be completed by the developer before draft guideline consultation)

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

We took into consideration all the equality issues identified during the scoping process especially looking separately for women with premature ovarian insufficiency, women who had hysterectomy, and women with or at risk of breast cancer. We included recommendations on provision of different areas of information and highlighted the benefits and risks for treatment options for menopausal symptoms in these groups of women.

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

3.3 Were the Committee's considerations of equality issues described in the consultation document, and, if so, where?

Yes, we covered these issues in the review protocols and the description of linking evidence to recommendations.

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?

We do not expect that the preliminary recommendations will create access difficulties for different groups of menopausal women based on the equality characteristics.

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?

No

Completed by Developer _____ G.Sarri

Date ___23.03.2015_____

Approved by NICE quality assurance lead

Date _____

4.0 Final guideline (to be completed by the Developer before GE consideration of final guideline)

4.1 Have any additional potential equality issues been raised during the consultation, and, if so, how has the Committee addressed them?

There was one stakeholder comment related to a separate specific recommendation about information and support for the young women, whose needs are unique and very different to natural age menopause. They suggested that such information needs to be specific and targeted.

The Committee addressed this comment by adding the following sections (*highlighted*) in the recommendation about information provision for women with POI;

Explain to women with premature ovarian insufficiency:

- the importance of starting hormonal treatment either with HRT or a combined hormonal contraceptive ***and continuing treatment until at least the age of natural menopause (unless contraindicated)***
- ***that the baseline population risk of diseases such as breast cancer and cardiovascular disease increases with age and is very low in women aged under 40***
- that HRT may have a beneficial effect on blood pressure when compared with a combined oral contraceptive
- that both HRT and combined oral contraceptives offer bone protection
- that HRT is not a contraceptive
- that both HRT and combined oral contraceptives offer bone protection
- that they should not use HRT as a contraceptive.

4.2 If the recommendations have changed after consultation, are there any recommendations that 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. We do not expect that the revised recommendations will create access

4.2 If the recommendations have changed after consultation, are there any recommendations that 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?

difficulties for different groups of menopausal women based on the equality characteristics.

No

4.3 If the recommendations have changed after consultation, is there potential for the recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?

No

4.4 If the recommendations have changed after consultation, 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 4.2, 4.3 and 4.4, or otherwise fulfil NICE's obligations to advance equality?

There are many recommendations in this guideline about information provision for women in menopause and health professionals working with them which aim to facilitate access to services.

4.5 Have the Committee's considerations of equality issues been described in the final guideline document, and, if so, where?

In the research recommendations sections in Chapters 8 and 11 of the full guideline.

Updated by Developer G.Sarri

Date: 26 August 2015

Updated by Committee Chair: M.A Lumsden

Date: 26 August 2015

Approved by NICE quality assurance lead

Date _____

5.0 After Guidance Executive amendments – if applicable (To be completed by appropriate NICE staff member after Guidance Executive)

5.1 Outline amendments agreed by Guidance Executive below, if applicable:

None.

Approved by Developer G.Sarri

Date_____10.11.2015_____

Approved by Committee Chair M.A Lumsden

Date_____10.11.2015_____

Approved by NICE quality assurance lead

Date_____