

1.0.7 DOC EIA

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE quality standards

Equality impact assessment

Emergency and acute medical care in over 16s

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

1. TOPIC ENGAGEMENT STAGE

1.1 Have any potential equality issues been identified during this stage of the development process?

No equality issues relating to protected characteristics defined in the Equality Act have been identified at this stage. However, service delivery of emergency and acute medical care must take into account local variation in systems as these may be set up differently due to local geography and demographics. The quality standard statements which are implemented should help to promote equal opportunity if implemented by reducing variation in practice.

1.2 Have any population groups, treatments or settings been excluded from coverage by the quality standard at this stage in the process. Are these exclusions justified – that is, are the reasons legitimate and the exclusion proportionate?

The target population for this scope is adults (18 years and over) and young people (16–17 years) who seek, or are referred for, emergency NHS care for a suspected or confirmed acute medical emergency.

The groups listed below are those that may also access the services provided for the target population for this scope (as defined above). They may be indirectly affected by the draft statements in some instances. However, it is not the intention of this quality standard to formulate statements on the service needs for these following groups:

- children
- people with acute obstetric emergencies.
- people with acute mental health emergencies, once a diagnosis has been made.
- people with acute surgical emergencies, once a diagnosis has been made.
- people who have experienced major trauma, complex or noncomplex fractures or spinal injury.
- people in hospital who are not there for an acute medical emergency (i.e. elective admissions) and do not develop an acute medical emergency during their stay.
- people already in hospital with acute deterioration.

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- people with chronic conditions who are being managed as outpatients but who require an elective admission for treatment from specialists who may be involved in the acute care pathway.

Also it is anticipated that the following issues require specific management which cannot be comprehensively covered in this quality standard:

- acute clinical management of specific medical conditions requiring urgent or emergency care.
- specific on-going management of a condition.
- non-emergency patient transport.
- resuscitation.
- nurse staffing in accident and emergency departments and on wards
- emergency planning and resilience.
- readmissions to intensive care units within 48 hours.

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