

## 1.0.7 DOC EIA

# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## NICE quality standards

### Equality impact assessment

#### People's experience using adult social care services

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?

The guideline development group noted that the following groups may have difficulty in accessing social care provision:

- People in complex and/or unstable living situations
- People with communication difficulties, and/or sensory impairment
- People with cognitive impairment including dementia

It also noted that lower socio-economic status may be associated with poor access to information about care options, or difficulty to pay for alternative care when no adult provision is available, or when individuals do not meet the threshold for adult services.

These issues will be considered during quality standard development.

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?

Children's social care is not included in this quality standard because the legislation, services and processes are different.

Completed by lead technical analyst: Eileen Taylor

Date: 15.02.2018

Approved by NICE quality assurance lead: Craig Grime

Date: 28.02.2018

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### 2. PRE-CONSULTATION STAGE

2.1 Have any potential equality issues been identified during the development of the quality standard (including those identified during the topic engagement process)? How have they been addressed?

All of the quality statements note that people may have a number of different needs, for example, difficulties with communication. Services should ensure that people have the assistance they need, for example through an independent advocate or communication aid.

Quality statements 1, 2 and 4 note that people should be provided with information about the care and support needs assessment, the options they have to control and use their allocated funds for purchasing care packages and about providing feedback on services that they can easily read and understand themselves, or with support. This means they can communicate effectively with health and social care services. Information should be in a format that suits their needs and preferences, for example in Braille format. It should be accessible to people who do not speak or read English, and it should be culturally appropriate and age appropriate. People should have access to an interpreter or independent advocate if needed. For people with additional needs related to a disability, impairment or sensory loss, information should be provided as set out in NHS England's [Accessible Information Standard](#).

Quality statements 1 and 3 note that people aged 18-24 who are in transition between children's and adult services may still be cared for under children's services and this needs to be taken into account. Adult social care services should work with children's social care services to address this.

Quality statements 2 and 3 note that people within the travelling community may not be resident in the same area for a long period of time. Practitioners will need to consider how to support people from the travelling community to manage their allocated funds, and the transition and handover arrangements that will be needed, when they move to another area.

2.2 Have any changes to the scope of the quality standard been made as a result of topic engagement to highlight potential equality issues?

No changes have been made to the scope of the quality standard at this stage.

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2.3 Do the draft quality statements 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?

None of the statements make it more difficult in practice for a specific group to access services compared with other groups

2.4 Is there potential for the draft quality statements to have an adverse impact on people with disabilities because of something that is a consequence of the disability?

No.

2.5 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 2.1, 2.2 or 2.3, or otherwise fulfil NICE's obligation to advance equality?

The equalities sections of all statements highlight ways in which barriers can be removed or alleviated.

Completed by lead technical analyst: Eileen Taylor

Date: 04/06/2018

Approved by NICE quality assurance lead: Mark Minchin

Date: 16/07/2018

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### 3. POST CONSULTATION STAGE

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

Stakeholders identified the need to include NHS England's Accessible Information Standard to statement 3. Sexual orientation was also highlighted as an area to be included during the care and support needs assessment to ensure this is taken into account when planning care and support. These areas have both been added to the quality standard.

3.2 If the quality statements have changed after the consultation stage, are there any 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?

None of the changes made post-consultation will make it more difficult for any groups to access services.

3.3 If the quality statements 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.

3.4 If the quality statements 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 3.1, 3.2 and 3.3, or otherwise fulfil NICE's obligations to advance equality?

The equalities sections of all statements highlight ways in which barriers can be removed or alleviated.

Completed by lead technical analyst: Eileen Taylor

Date: 26/09/2018

Approved by NICE quality assurance lead: Mark Minchin

Date 14/11/2018

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### 4. After Guidance Executive amendments

4.1 Outline amendments agreed by Guidance Executive below, if applicable:
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N/A – no amendments required which impact on equality and diversity considerations.
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Completed by lead technical analyst: Eileen Taylor

Date: 18/12/2018

Approved by NICE quality assurance lead: Mark Minchin

Date: 18/12/2018

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