

NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE

CENTRE FOR CLINICAL PRACTICE

QUALITY STANDARDS PROGRAMME

Quality standard topic: Nutrition support in adults

Output: Equality impact assessment form – Draft Quality Standard

Introduction

As outlined in the [Quality Standards Programme interim process guide](#) (available from www.nice.org.uk), NICE has a duty to take reasonable action to avoid unlawful discrimination and advance equality of opportunity. The purpose of this form is to document the consideration of equality issues in each stage of the development process before reaching the final output that will be approved by the NICE Guidance Executive. This assessment is also designed to achieve compliance with NICE's obligations under the Human Rights Act 1998.

Taking into account each of the equality characteristics in table 1, the form should be used to:

- confirm that equality issues have been considered
- ensure that the quality standards outputs do not discriminate against any of the equality groups
- highlight planned action relevant to equality
- highlight areas where quality standards may advance equality of opportunity.

This form is completed by the NICE quality standards internal team at each stage within the development process:

- Selection of Topic Expert Group and Chair
- Topic Expert Group meeting one – creation of draft quality standard
- Topic Expert Group meeting two – creation of final quality standard.

Table 1

Equality characteristics^a
Sex/gender <ul style="list-style-type: none">• Women• Men
Ethnicity <ul style="list-style-type: none">• Asian or Asian British• Black or Black British• Mixed/multiple ethnic groups• Irish• White British• Chinese• Other minority ethnic groups not listed• Gypsy or Irish Travellers
Disability <ul style="list-style-type: none">• Sensory• Learning• Mental health• Cognitive• Mobility• Other impairment
Age^b <ul style="list-style-type: none">• Children and young people• Young adults• Older people
Sexual orientation <ul style="list-style-type: none">• Lesbians• Gay men• Bisexual people
Gender reassignment
Religion and belief
Marriage and civil partnership
Pregnancy and maternity

Socio-economic status

Depending on policy or other context, this may cover factors such as social exclusion and deprivation associated with geographical areas (e.g. the Spearhead Group of local authorities and PCTs, neighbourhood renewal fund areas) or inequalities or variations associated with other geographical distinctions (e.g. the North/South divide, urban versus rural).

Other categories

- Refugees and asylum seekers
- Migrant workers
- Looked after children
- Homeless people

^a This list is illustrative rather than comprehensive

^b Definitions of age groups may vary according to policy or other context

Quality standards equality impact assessment

Stage: Topic Expert Group selection

Topic: Nutrition support adults

<p>1. Have any equality issues impacting upon equality target groups been identified during this stage of the development process?</p> <ul style="list-style-type: none">• Please state briefly any relevant issues identified and the plans to tackle them during development
<p>The Topic Expert Group identified the following as important equality issues which could potentially impact on equality target groups:</p> <ul style="list-style-type: none">• Communication with people with limited language skills, those where English is not their first language and with patients with sensory and learning disabilities• Dietary requirements of different groups e.g. vegetarians, religious/cultural groups, people with Coeliac disease etc• Ethical issues around withholding and withdrawing nutritional support <p>The full clinical guideline for Nutrition Support in Adults (CG32, 2006) states that: 'patients and/or carers should be involved in the decision-making process regarding the method(s) of feeding and any cultural and/or ethnic needs and/or preferences should be taken into account'.</p> <p>These issues will be considered as part of the consultation process for the quality standard.</p>
<p>2. Have relevant bodies and stakeholders been consulted?</p> <ul style="list-style-type: none">• Have relevant bodies been consulted?• Have comments from stakeholders that highlight potential for discrimination or advancing equality been considered?
<p>To gain multiple perspectives from all stages of nutrition support in adults, representation within the Topic Expert Group was sought from a variety of audiences including academic and clinical experts in the field of nutrition, consultants in gastroenterology, clinical nurse specialists, lay members, dietitians, speech and language therapy, pharmacy, general practice and commissioning.</p> <p>During the next stage of the quality standard development a full consultation will take place which will enable relevant bodies and stakeholders to comment on the draft quality standard.</p>
<p>3. If exclusions exist at this stage in the process (for example, populations, treatments or settings) are these legal and justified?</p> <ul style="list-style-type: none">• Are the reasons legitimate? (they do not discriminate against a particular group)• Is the exclusion proportionate or is there another approach?

This quality standard applies to adults (aged 18 years or older) only. This is appropriate as the nutritional needs of children would require separate consideration from the nutritional needs of adults.

The primary prevention of malnutrition in healthy individuals in the general population will not be covered by the quality standard. The TEG considered this to be outside of the remit of this quality standard. This exclusion is appropriate as it is an issue that is separate from provision of nutritional support for people who are malnourished or at risk of malnourishment.

The management of specific conditions and the specific management of pregnancy, eating disorders and obesity will not be included in this quality standard. The management of these groups will be addressed by quality standards on specific conditions or groups e.g. for pregnant women the quality standard for Antenatal Care which is currently being developed.

It is not expected that these exclusions discriminate against any particular equality group(s).

4. If applicable, do any of the quality statements make it impossible or unreasonably difficult in practice for a specific group to access a service or element of a service?

- Does access to a service or element of a service depend on membership of a specific group?
- Does a service or element of the service discriminate unlawfully against a group?
- Do people with disabilities find it impossible or unreasonably difficult to receive a service or element of a service?

The statements do not prevent any specific groups from accessing services.

5. If applicable, does the quality standard advance equality?

- Please state if the quality standard, including statements, measures and indicators, as described will advance equality of opportunity, for example by making access more likely for certain groups, by tailoring the service to certain groups, or by making reasonable adjustments for people with disabilities?

A positive impact is expected. We believe these statements promote equality.