# **Appendix C**

#### NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE

# GUIDELINES EQUALITY IMPACT ASSESSMENT FORM SCOPING

As outlined in the guidelines manual NICE has a duty to take reasonable action to avoid unlawful discrimination and promote equality of opportunities. The purpose of this form is to document that equalities issues have been considered in reaching the final scope for a clinical guideline.

Taking into account **each** of the equality characteristics below the form needs:

- To confirm that equality issues have been considered at **every stage** of the scoping (from drafting the key clinical issues, stakeholder involvement and wider consultation to the final scope)
- Where groups are excluded from the scope, to comment on any likely implications for NICE's duties under equality legislation
- To highlight planned action relevant to equalities.

This form is completed by the National Collaborating Centre (NCC) Director and the Guideline Development Group (GDG) Chair **for each guideline** and submitted with the final scope for sign off by the Chair of the Guidelines Review Panel (GRP) and the lead from the Centre for Clinical Practice.

#### **EQUALITY CHARACTERISTICS**

#### Sex/gender

Women

Men

# **Ethnicity**

- Asian or Asian British
- Black or black British
- · People of mixed race
- Irish
- White British
- Chinese
- Other minority ethnic groups not listed

## Disability

- Sensory
- · Learning disability
- Mental health
- Cognitive
- Mobility
- Other impairment

## Age<sup>1</sup>

- Older people
- Children and young people
- · Young adults

# Sexual orientation & gender identity

- Lesbians
- Gay men
- Bisexual people
- Transgender people

#### Religion and belief

<sup>&</sup>lt;sup>1.</sup> Definitions of age groups may vary according to policy or other context.

#### 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 etc) or inequalities or variations associated with other geographical distinctions (e.g. the North/South divide, urban versus rural).

#### Other categories<sup>2</sup>

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

# GUIDELINES EQUALITY IMPACT ASSESSMENT FORM: SCOPING

Guideline title: Hepatitis B

## 1. Have relevant equality issues been identified during scoping?

- · Please state briefly any relevant issues identified and the plans to tackle them during development
- For example
  - if the effect of an intervention may vary by ethnic group, what plans are there to investigate this?
  - If a test is likely to be used to define eligibility for an intervention, how will the GDG consider whether all groups can complete the test?

The guideline considers all children, young people and adults with chronic hepatitis B including:

- People co-infected with hep C or hep D virus
- Immunocompromised people (such as those undergoing cancer treatments) who are carriers or have been previously infected, for whom prophylactic treatment might be beneficial
- Pregnant and lactating women
- People with cirrhosis, including those with liver decompensation

A high prevalence of first generation migrants was identified and included during scoping - we

<sup>&</sup>lt;sup>2.</sup> This list is illustrative rather than comprehensive.

plan to address this within the guideline.
2. If there are exclusions listed in the scope (for example, populations, treatments or settings) are these justified?
<ul> <li>Are the reasons legitimate? (they do not discriminate against a particular group)</li> <li>Is the exclusion proportionate or is there another approach?</li> </ul>
<ul> <li>The guideline excludes populations that have had a liver transplant as due to improvements in management and treatments this constitutes a very small group.</li> <li>Acute hepatitis B as this was not part of the remit.</li> <li>People co-infected with HIV. Guidance is already available by British HIV Association on Hepatitis B in people co-infected with HIV. An update of this guidance is planned.</li> </ul> These groups would require separate guidance
3. Have relevant bodies and stakeholders been consulted?
<ul> <li>Have relevant bodies been consulted?</li> <li>Have comments from stakeholders that highlight potential for discrimination or promoting equality been considered in the final draft?</li> </ul>
Following the stakeholder workshop on 25 <sup>th</sup> May 2011, the scope was revised to incorporate stakeholder comments. Registered stakeholders were also invited to comment on the scope during the consultation period (14 <sup>th</sup> June – 5 <sup>th</sup> July 2011). The scope was revised again to
address and incorporate the relevant comments.