#### 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

#### 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

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

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

# GUIDELINES EQUALITY IMPACT ASSESSMENT FORM: SCOPING

Guideline title: Intravenous fluid therapy in adults in hospital (clinical guideline and quality standard)

## 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
  - o 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 scope considers all people aged sixteen years or over who receive healthcare in NHS hospital settings irrespective of gender, ethnicity, disability, religion or beliefs, sexual orientation and gender identity or socio-economic status. Older people and specific religious groups have been identified as a subgroups that may need particular consideration and therefore specific issues relating to this group will be addressed when reviewing the evidence and formulating the recommendations.

Should any other inequalities in care be identified during the course of guideline development process we will also address them.

# 2. If there are exclusions listed in the scope (for example, populations, treatments or settings) are these justified?

- Are the reasons legitimate? (they do not discriminate against a particular group)
- Is the exclusion proportionate or is there another approach?
- a) Children and young people under the age of 16 years have been excluded as they have different physiological requirements for IV fluid therapy.
- b) IV fluid management in pregnant women has also been excluded as a specific subgroup for recommendation development as this group have specialist fluid requirements. The general IV fluid therapy principles may however apply to this group and can be noted in the guideline. In addition, other NICE guidelines make recommendations in this area, such as The management of hypertension in pregnancy (CG107) and Intrapartum care (CG55)
- c) IV fluid therapy management has been excluded in the following groups as these patients have specialist fluid requirements: people with established severe renal disease or liver disease; people requiring inotropes therapy to support their circulation; people with burns and people with traumatic head injury or needing neurosurgery.

#### 3. Have relevant bodies and stakeholders been consulted?

- Have relevant bodies been consulted?
- Have comments from stakeholders that highlight potential for discrimination or promoting equality been considered in the final draft?

Following the stakeholder workshop of the 25th of May 2011, the scope was revised to incorporate stakeholder comments. Registered stakeholders were also invited to comment on the draft scope during the consultation period (14<sup>th</sup> of May until the 5<sup>th</sup> of July 2011), and the scope has been revised again to address and incorporate relevant comments. All comments will be addressed and responded to.

Signed off:	
lan Bullock	Mike Stroud
Centre Director	GDG Chair

Approved and signed off:

Sharon Summers-Ma

Associate Director - Centre for Clinical Practice