NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE guidelines

Equality impact assessment

Antimicrobial prescribing: otitis media (acute) (update)

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

1.0 Checking for updates and scope: before scope consultation (to be completed by the Developer and submitted with the draft scope for consultation)

1.1 Have any potential equality issues been identified during the check for an update or during development of the draft scope, and, if so, what are they?

A number of patient groups were identified during the check for an update where equality issues need to be considered.

Age: The scope includes adults and children (excluding neonates, those in the first 4 weeks of life). Recommendations may need to consider age based on the evidence base and labelling of products available.

Pregnancy and maternity: The scope includes women who are pregnant or breastfeeding. Recommendations may need to consider use in pregnancy or breastfeeding based on the evidence base and labelling of products available.

1.2 What is the preliminary view on the extent to which these potential equality issues need addressing by the Committee? For example, if population groups, treatments or settings are excluded from the scope, are these exclusions justified – that is, are the reasons legitimate and the exclusion proportionate?

The scope covers all adults and children in all care settings irrespective of gender, ethnicity, disability, religious beliefs, sexual orientation, gender identity or socioeconomic status.

Neonates

1.0.7 DOC EIA

The scope excludes neonates (children in the first 4 weeks of life) as NICE has published a guideline on <u>neonatal infection</u>.

2.0 Checking for updates and scope: after consultation (to be completed by the Developer and submitted with the revised scope)

2.1 Have any potential equality issues been identified during consultation, and, if so, what are they?

Not applicable.

2.2 Have any changes to the scope been made as a result of consultation to highlight potential equality issues?

Not applicable.

2.3 Is the primary focus of the guideline a population with a specific disabilityrelated communication need?

If so, do the key messages for the public need to be produced in an alternative version?

If so, which alternative version is recommended?

The alternative versions available are:

- large font or audio versions for a population with sight loss
- British Sign Language videos for a population deaf from birth
- 'Easy read' versions for people with learning disabilities or cognitive impairment.

Does an alternative version(s) of the consultation documents also need to be produced?

The guideline population is all people. The guideline recommendations are presented as a visual summary as well as in the guideline, which is written in language that is simple and straightforward.

1.0.7 DOC EIA

3.0 Guideline development: before consultation (to be completed by the Developer before consultation on the draft guideline)

3.1 Have the potential equality issues identified during the scoping process been addressed by the Committee, and, if so, how?

Age and pregnancy and maternity were considered. The age of children in the evidence base varied but no specific recommendations related to age or pregnancy and maternity were needed.

3.2 Have any **other** potential equality issues (in addition to those identified during the scoping process) been identified, and, if so, how has the Committee addressed them?

No.

3.3 Have the Committee's considerations of equality issues been described in the guideline for consultation, and, if so, where?

The committee discussed that the age of the children varied in the studies (from 1 year), but that there is no age-based restriction for using the licensed preparation (Otigo ear drops). The new recommendation for using ear drops containing an anaesthetic and an analgesic applies to all people, within its licensed indications.

3.4 Do the preliminary recommendations 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?

No.

3.5 Is there potential for the preliminary recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?

No.

3.6 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 or 3.3, or otherwise fulfil NICE's obligation to advance equality?

Not applicable.