

GUIDELINES EQUALITY IMPACT ASSESSMENT FORM

RECOMMENDATIONS

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 equality issues have been considered in the recommendations of a clinical guideline. Please refer to the 'Positively equal guide' for further information on questions to be considered during the development of recommendations.

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

- To confirm that equality issues identified during the scoping stage have been addressed where possible, in the evidence reviews or other evidence underpinning the recommendations
- To ensure the recommendations do not discriminate against any of the equality groups
- To highlight areas where recommendations may promote equality.

This form is completed by the Short Clinical Guidelines Team and the Guideline Development Group **for each guideline** before consultation, and amended following consultation to incorporate any additional points or issues raised by stakeholders.

The final version is presented with the final guideline, signed by the SCG Associate Director and the Guideline Development Group (GDG) Chair, to be countersigned by the GRP chair and the guideline lead from the Centre for Clinical Practice.

EQUALITY CHARACTERISTICS	
<p>Age</p> <ul style="list-style-type: none"> • Older people • Children and young people • Young adults <p>Definitions of age groups may vary according to policy or other context</p>	<p>Religion or belief</p> <ul style="list-style-type: none"> • Religions (e.g. Christian; Muslim; Hindu; Jewish; Sikh; Buddhist) • Denominations or sects within a religion (e.g. Jehovah's Witness; Sufi) • Structured philosophical belief (e.g. atheism; humanism) • Lack of religion or belief
<p>Disability</p> <ul style="list-style-type: none"> • Sensory • Learning disability • Mental health • Cognitive • Mobility 	<p>Sexual orientation</p> <ul style="list-style-type: none"> • Lesbians • Gay men • Bisexual people
<p>Ethnicity</p> <p>Asian or Asian British Black or black British People of mixed ethnicity Irish White British Chinese</p>	<p>Socio-economic status</p> <p>Depending on specific policy context, this may include factors such as:</p> <ul style="list-style-type: none"> • Social exclusion and deprivation associated with geographical areas (e.g. the Spearhead Group of local authorities and PCTs, neighbourhood renewal fund areas). • Inequalities associated with other geographical distinctions (e.g. the North/South divide, urban versus rural). • Inequalities in income, education, health, housing, crime rates or other factors associated with socio-economic disadvantage.
<p>Gender</p> <ul style="list-style-type: none"> • Women • Men 	<p>Other categories</p> <ul style="list-style-type: none"> • Refugees and asylum seekers • Migrant workers • Looked after children • Homeless people <p>This list is illustrative rather than comprehensive. These groups are not specifically protected under current or forthcoming legislation, but it is good practise to consider their needs. From a legal perspective, people in these groups are likely to fall within one or more of the categories that are specifically protected.</p>
<p>Gender identity</p> <ul style="list-style-type: none"> • Transsexual people • Transgendered people 	

GUIDELINES EQUALITY IMPACT ASSESSMENT FORM: RECOMMENDATIONS

Guideline title: Hyperglycaemia

1. Have the equality areas identified during the scoping stage as needing attention been addressed in the guideline?

Please confirm whether

- the evidence reviews addressed the areas that had been identified in the scope as needing specific attention with regard to equalities issues.

Please note this also applies to consensus work in or outside the GDG

- the development group has considered these areas in their discussions

Note: some issues of language may correlate with ethnicity; and some communication issues may correlate with disability

The GDG noted in their discussions that some ethnic groups may have a lower index of suspicion for diabetes while other groups, such as people of south Asian descent, may be genetically predisposed to developing diabetes. However, it was felt that routine follow-up would apply to all ethnic groups therefore the GDG felt that the recommendations should not single out any ethnic groups.

2. Do any recommendations make it impossible or unreasonably difficult in practice for a specific group to access a test or intervention?

For example:

- Does access to the intervention depend on membership of a specific group?
- Does using a particular test discriminate unlawfully against a group?
- Do people with disabilities find it impossible or unreasonably difficult to receive an intervention?

The scope of this guideline excludes children as this population are not considered high risk for developing ACS with Hyperglycaemia.

3. Do the recommendations promote equality?

Please state if the recommendations are formulated so as to promote equalities, for example by making access more likely for certain groups, or by tailoring the intervention to specific groups?

The recommendations aim to identify those people who are at high risk of developing diabetes and to improve diagnosis.

Signed:

Nicole Elliott

Damien Longson

SCG Associate Director

GDG Chair

Date: June 2011

Date: June 2011

Approved and signed off:

Sarah Willett

Peter Robb

CCP Lead

GRP chair

Date: September 2011

Date: September 2011