# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

### **NICE** guidelines

#### **Equality impact assessment**

## Peripheral arterial disease (PAD)

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

## 3.0 Guideline development: before consultation (to be completed by the developer before draft guideline consultation)

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

Not applicable (Clinical Guideline Updates do not include a scoping phase).

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?

The committee identified a number of potential equality issues including:

- Community settings such as nursing homes
- Ethnicity, particularly the South Asian population who are predisposed to diabetes
- Learning difficulties which impact on the ability to report symptoms and seek healthcare advice
- Socioeconomic status and smoking prevalence
- Transportation issues especially when comparing services commissioned in urban and rural areas

#### **1.0.7 DOC EIA**

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?

However, the committee identified that these issues are related to PAD, diabetes and the availability of healthcare and diagnostic services in general rather than the accuracy of diagnostic tools.

The committee also identified presence of oedema and obesity as potential issues which may affect the ability to carry out tests however, the committee did not consider these issues influence the accuracy of the diagnostic tests.

3.3 Were the Committee's considerations of equality issues described in the consultation document, and, if so, where?

Yes – in the "other factors the committee took into account" section of the committee's discussion of the evidence.

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?

The committee did not identify the preliminary recommendations to make it more difficult in practice for a specific group to access services compared with other groups. The new recommendations were identified to provide further clarification of existing recommendations and promoting the importance of pulse examination within the whole clinical context, including symptoms.

#### **1.0.7 DOC EIA**

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?

The committee did not identify the preliminary recommendations to have an adverse impact on people with disabilities.

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?

No other recommendations or explanations could be made.

Completed by Developer: Susan Spiers, Associate Director - Updates

Date: 14/11/17

Approved by NICE quality assurance lead: Simon Ellis, Guideline Lead

Date: 14/11/17