

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
<p>Sex/gender</p> <ul style="list-style-type: none"> • Women • Men
<p>Ethnicity</p> <ul style="list-style-type: none"> • Asian or Asian British • Black or black British • People of mixed race • Irish • White British • Chinese • Other minority ethnic groups not listed
<p>Disability</p> <ul style="list-style-type: none"> • Sensory • Learning disability • Mental health • Cognitive • Mobility • Other impairment
<p>Age¹</p> <ul style="list-style-type: none"> • Older people • Children and young people • Young adults <p>¹ Definitions of age groups may vary according to policy or other context.</p>
<p>Sexual orientation & gender identity</p> <ul style="list-style-type: none"> • Lesbians • Gay men • Bisexual people • Transgender people
<p>Religion and belief</p>
<p>Socio-economic status</p> <p>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).</p>
<p>Other categories²</p> <ul style="list-style-type: none"> • Gypsy travellers • Refugees and asylum seekers • Migrant workers • Looked after children • Homeless people <p>² This list is illustrative rather than comprehensive.</p>

**GUIDELINES EQUALITY IMPACT ASSESSMENT FORM:
SCOPING**

Guideline title: Idiopathic Pulmonary Fibrosis

1. Have relevant equality issues been identified during scoping?

No patient subgroups have been identified as needing specific consideration.

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

Populations excluded from scope and relevant justifications:

a) Children and young people (younger than 18).

IPF in children and young people is extremely rare and is clinically very different from the adult disease

b) People with a diagnosis of pulmonary fibrosis as a complication of:

- connective tissue disorders (e.g. systemic lupus erythematosus, rheumatoid arthritis, scleroderma, polymyositis and dermatomyositis)
- a known exogenous agent (for example, drug-induced disease or asbestosis).

These conditions are clinically very different from IPF, but happen to present in a similar manner

Clinical issues that will not be covered

a) Therapies for pulmonary hypertension as a complication of IPF.

b) Treatment of lung cancer as a complication of IPF.

c) Lung transplantation other than timing and referral.

Management of pulmonary hypertension and lung cancer as a complication of IPF is more appropriately dealt with within the pulmonary hypertension and lung cancer guidelines (and their updates). The outcomes of lung transplantation specifically for IPF cannot be addressed without comparison to the outcomes of lung transplants for other conditions. This is therefore not within the remit of this guideline.

3. Have relevant bodies and stakeholders been consulted?

- The scope went out for public consultation with registered stakeholders and was available to the general public for comment.