

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. Please refer to the 'Positively equal guide' for further information on questions to be considered during scoping.

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 Internal Clinical Guidelines Programme Associate Director and the Guideline Development Group (GDG) Chair for each guideline and submitted with the final scope for sign off by the guideline lead from the Centre for Clinical Practice.

Cholelithiasis and cholecystitis

| 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: SCOPING

Guideline title: Cholelithiasis and cholecystitis

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
 - 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 guideline considers all people who receive healthcare in all settings within NHS services irrespective of gender, ethnicity, disability, religion or beliefs, sexual orientation and gender identity or socio-economic status. Where appropriate, the developers will consider these points when making recommendations for this guideline.

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 (i.e. the greater the relevance of a function to equality, the greater the regard which should be paid to equality issues) or is there another approach?

Children and young people, as cholelithiasis and cholecystitis in this group are considered relatively rare and have a different aetiology to the adult condition.

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 scope?

Yes. All registered stakeholders for this guideline were given an opportunity to comment on the scope during the consultation period.

Cholelithiasis and cholecystitis

Three groups were highlighted during consultation in terms of potential equality issues – children, pregnant women and non verbal patients (particularly those with disabilities):

- Children and young people have been excluded as cholelithiasis and cholecystitis are considered relatively rare in this group.
- Treating and managing non verbal patients is a challenge across all health conditions and should be dealt with in its entirety across the NHS rather than just specific to cholelithiasis and cholecystitis. The Patient experience guideline (CG138) will support this approach.
- Pregnant women may be considered as a potential subgroup during the evidence reviews, and if supported by robust evidence specific considerations for recommendations will be made where appropriate.

Signed:

Nicole Elliott

ICG Associate Director

Gary McVeigh

GDG Chair

Approved and signed off:

Sarah Willett

CCP Lead