

NICE guidelines

Equality impact assessment

Multiple Sclerosis in adults: management (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 Is the proposed primary focus of the guideline a population with a specific communication or engagement need, related to disability, age, or other equality consideration? **Yes**

If so, what is it and what action might be taken by NICE or the developer to meet this need? (For example, adjustments to committee processes, additional forms of consultation.)

The guideline considers adults who have a diagnosis of MS or possible MS, or are being investigated for MS. MS affects each person differently and has a broad range of symptoms including mobility problems and fatigue that range in severity. The condition may be characterised by periods of relapse and remission. The debilitating and unpredictable nature of MS may make it difficult for some people with MS to engage with the guideline development and consultation process.

Lay members of the guideline development committee may find it difficult to engage in or attend all committee meetings during periods of relapse/fatigue. To address this we are proposing to recruit three lay members, to mitigate the risk of not having lay representation throughout development.

To address disability needs we will ensure that the location of the meetings and meeting materials are fully accessible for the committee members.

During the guideline development process we will explore whether additional steps will be needed at consultation to support people to comment on the draft guideline.

1.2 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?

- Age - No
- Disability - No
- Gender reassignment - No
- Pregnancy and maternity - A common question is whether pregnancy is linked to relapses.
- Race - No
- Religion or belief - No
- Sex - MS is more common in women and more common in northern European latitudes.
- Sexual orientation - No
- Socio-economic factors - No
- Other definable characteristics:
 - People living in rural areas.

1.3 What is the preliminary view on the extent to which these potential equality issues need addressing by the Committee?

- The guideline excludes children and young people under the age of 18 years. We have excluded children and young people under the age of 18 years for several reasons – (1) the number of affected children and young people is small, (2) differential diagnosis and complexity of diagnosis is different than for adults.
- MS is more common in women and more common in northern European latitudes. There is no evidence that this affects the issues under consideration in the guideline.
- People who may become pregnant will be considered with respect to pregnancy affecting relapse. A specific question on this may be required. This was not highlighted as a priority area at the stakeholder workshop but it was noted that the recommendations should be moved from the section on modifiable risk factors. There is a clinical question on information and support needs.

- People in rural areas experience difficulty accessing neurological services. This will need to be considered when making the recommendations

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