NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE guidelines

Equality impact assessment

Stroke and transient ischaemic attack in over 16s: diagnosis and initial management (update)

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 consultation on the draft guideline)

- 3.1 Have the potential equality issues identified during the scoping process been addressed by the Committee, and, if so, how?
 - The committee discussed the issues identified during the scoping process but considered these groups were not affected by intensive interventions to lower blood pressure in people with intracerebral haemorrhage.
- 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?
 - Age (as a proxy measure for fragility) older clinically frail adults are less likely to benefit from intensive interventions to lower blood pressure with acute intracerebral haemorrhage.
 - Disability no issues were identified for maintenance or restoration of homeostasis
 - Gender reassignment - no issues were identified for maintenance or restoration of homeostasis
 - Pregnancy and maternity - no issues were identified for maintenance or restoration of homeostasis
 - Race (Ethnicity) no issues were identified for maintenance or restoration of

homeostasis

- Religion or belief no issues were identified for maintenance or restoration of homeostasis
- Sex no issues were identified for maintenance or restoration of homeostasis
- Sexual orientation no issues were identified for maintenance or restoration of homeostasis
- Socio-economic factors- no issues were identified for maintenance or restoration of homeostasis

3.3 Have the Committee's considerations of equality issues been described in the guideline for consultation, and, if so, where?

The Committee's considerations of equality issues are described in the evidence review on intensive interventions to lower blood pressure in people with intracerebral haemorrhage. In particular in the 'benefits and harms' and 'other considerations' sections of the discussion. A research recommendation was also made to address the lack of evidence in older people who are clinically frail.

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 agreed that none of the draft recommendations should make it more difficult for any of the groups identified above to access services.

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?

No, people with disabilities should be able to access intensive interventions to lower blood pressure in people with intracerebral haemorrhage in the same way as people without 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 box 3.4, or otherwise fulfil NICE's obligation to advance equality?

None required.

Completed by Developer: Eric Power, Programme Director - Medicines and Technologies Programme

Date: 11.02.22

Approved by NICE quality assurance lead: Nichole Taske, Guideline Lead

Date: 11.02.22