

12 MAR 2014

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

CLINICAL GUIDELINE EQUALITY IMPACT ASSESSMENT – SCOPING

Clinical guideline: Myeloma: diagnosis and management of myeloma

As outlined in The guidelines manual (2012), NICE has a duty to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations. The purpose of this form is to document the consideration of equality issues at the scoping stage of the guideline development process. This equality impact assessment is designed to support compliance with NICE's obligations under the Equality Act 2010 and Human Rights Act 1998.

Table 1 lists the equality characteristics and other equality factors NICE needs to consider – not just population subgroups sharing the 'protected characteristics' defined in the Equality Act, but also groups affected by health inequalities associated with socioeconomic factors or other forms of disadvantage. Table 1 does not attempt to provide further interpretation of the protected characteristics.

This form should be completed by the guideline developer before scope sign-off, and approved by the NICE lead for the guideline at the same time as the scope. The form will be published on the NICE website with the final scope. The form is used to:

- record any equality issues raised in connection with the guideline during scoping by anybody involved, including NICE, the National Collaborating Centre, the GDG Chair and stakeholders
- demonstrate that each of these issues has been considered and explain how it will be taken into account during guideline development if appropriate
- highlight areas where the guideline may advance equality of opportunity or foster good relations
- ensure that the guideline will not discriminate against any of the equality groups.

Table 1 NICE equality groups

Protected characteristics
<ul style="list-style-type: none">• Age• Disability• Gender reassignment• Pregnancy and maternity• Race• Religion or belief• Sex• Sexual orientation• Marriage and civil partnership (protected only in respect of the need to eliminate unlawful discrimination)
Additional characteristics to be considered
<ul style="list-style-type: none">• Socio-economic status <p>Depending on policy or other context, this may cover factors such as social exclusion and deprivation associated with geographical areas, or inequalities or variations associated with other geographical distinctions (for example, the North–South divide; urban versus rural).</p>
<ul style="list-style-type: none">• Other <p>Other groups in the population experience poor health because of circumstances often affected by, but going beyond, sharing a protected characteristic or socioeconomic status. Whether such groups can be identified depends on the guidance topic and the evidence. The following are examples of groups that may be covered in NICE guidance:</p> <ul style="list-style-type: none">• refugees and asylum seekers• migrant workers• looked-after children• homeless people.

1. Have equality issues been identified during scoping?

- Record any issues that have been identified and plans to tackle them during guideline 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?

Myeloma is almost twice as common in Afro-Caribbean compared with people of other family origins (for both women and men). However, the treatment options are no different and therefore it is not necessary to distinguish between this group and other patients in the recommendations.

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

- Are the reasons legitimate? (that is, they do not discriminate against a particular group)
- Is the exclusion proportionate?

Children and young people (aged less than 16 years) with suspected, newly diagnosed or relapsed myeloma.

This group has been excluded because it is extremely rare that myeloma is diagnosed in children and young people (anecdotally, the youngest case known is generally thought to be in their 20s).

Management of:

- **MGUS;**
- **solitary plasmacytoma;**
- **Amyloid Light-chain (AL) amyloidosis; and**
- **paraproteins secondary to other conditions.**

These groups have been excluded because, although these conditions are related to myeloma, their management does not form part of the treatment regimens for myeloma.

3. Have relevant stakeholders been consulted?

- Have all relevant stakeholders, including those with an interest in equality issues been consulted?

- Have comments highlighting potential for discrimination or advancing equality been considered?

Stakeholder Consultation took place between 10 December 2013 and 21 January 2014.

One stakeholder queried whether the GDG would fairly represent the Afro-Caribbean population. In response, we noted that while the incidence of myeloma is higher in the Afro-Caribbean population, the management of their disease is no different and we therefore do not feel that they need to be specified as a sub-group. In addition, GDG members are recruited via an open advert and people from all communities and ethnic groups are welcome to apply.