NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE guidelines

Equality impact assessment

Severe mental illness and substance misuse (dual diagnosis): community health and social care services

The impact on equality has been assessed during guidance development according to the principles of the NICE equality policy.

1.0 Scope: before consultation (To be completed by the developer and submitted with the draft scope for consultation)

1.1 Have any potential equality issues been identified during the development of the draft scope, before consultation, and, if so, what are they?

(Please specify if the issue has been highlighted by a stakeholder)

People with 'dual diagnosis' (severe mental illness combined with misuse of substances) are some of the most vulnerable in our society.

The extent and nature of 'dual diagnosis' is poorly understood and may vary according to characteristics protected by the Equality Act 2010: age and race as well as other factors. There is a potential for equality issues to be important for particular groups, such as:

- adults or young people who are: homeless or in insecure accommodation, from a low-income family or on a low income, socially isolated, lesbian, gay, bisexual, transsexual or transgender, have been young or former offenders, sex workers, travellers, asylum seekers or refugees, from a minority ethnic group;
- adults or young people who have a learning disability; or
- adults who have a history of being 'looked after' or adopted; have a history of experiencing, or witnessing or perpetrating violence or abuse
- young people who: have experienced abuse or witnessed domestic violence and abuse, are 'looked after' or adopted, are excluded from school, are teenage parents, have been excluded from school or whose parents have mental health or substance misuse problems.

Prevalence, access to services and outcomes may also vary by geographical location.

 1.2 What is the preliminary view on the extent to which these potential equality issues need addressing by the Committee? For example, if population groups, treatments or settings are excluded from the scope, are these exclusions justified – that is, are the reasons legitimate and the exclusion proportionate? 			
The reviews that will be produced to inform guidance development will include, where available, evidence on populations with dual diagnosis that also have protected (and additional) characteristics. These potential issues will be considered as part of PHAC discussions during guideline development.			
Approved by NICE quality assurance leadDr Catherine Swann Date24/10/2014			
2.0 Scope: after consultation (To be completed by the developer and submitted with the final scope)			
2.1 Have any potential equality issues been identified during consultation, and, if so, what are they?			
Yes. Stakeholders highlighted older age groups should be included.			
2.2 Have any changes to the scope been made as a result of consultation to highlight potential equality issues?			
No.			

2.3 Is the primary focus of the guideline a population with a specific disabilityrelated communication need?

If so, is an alternative version of the 'Information for the Public' document recommended?

If so, which alternative version is recommended?

The alternative versions available are:

- large font or audio versions for a population with sight loss;
- British Sign Language videos for a population who are deaf from birth;
- 'Easy read' versions for people with learning disabilities or cognitive impairment.

No, this is not the primary focus.

However, the guideline will cover people who have a learning disability who may have communication needs. The guideline will also cover people who are asylum seekers, refugees or from a minority ethnic group for whom fluency in English may be an issue.

Furthermore, severe mental illness and / or substance misuse may present additional communication issues for people with dual diagnosis.

Approved	by NICE quality assurance lead _	
_Dr Cathe	rine Swann	
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Date	_14/01/2015	