NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE guidelines

Equality impact assessment

Managing medicines for people receiving social care in the community

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

Guideline development: before consultation (to be completed by the developer before draft guideline consultation)

3.1 Have the potential equality issues identified during the scoping process been addressed by the Committee, and, if so, how?

The evidence reviews did not include evidence that fully addressed all the populations identified during scoping that may be of specific interest (for example, people approaching end of life and those people who choose to wholly self-fund their social care). However, the lack of evidence for specific populations made no impact upon the recommendations for interventions, systems and processes for safe and effective use of medicines for people receiving social care in the community.

Due to an overall paucity of available research evidence, no specific research recommendations could be made to address the gaps in the evidence identified by the Committee.

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?

The Committee identified that there are potential equality issues (such as a lack of advice and information resources to support safe and effective medicines use) for people who choose to wholly self-fund their social care in the community.

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?

The Committee recognised that such resources would be valuable and recognised that responses to the guideline consultation process may highlight what resources are currently available and used in practice.

3.3 Were the Committee's considerations of equality issues described in the consultation document, and, if so, where?

Yes. The Committee's considerations of equality issues are described in the consultation document, for example the lack of advice resources to support safe and effective medicines use for people who choose to wholly self-fund their social care in the community is addressed in section 6.5 (Linking evidence to recommendations – Handling medicines).

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?

No, the interventions, systems and processes recommended in the draft guideline (for example to ensure that people assessing a person's medicines support needs, including social workers, have the necessary knowledge, skills and experience) are non-discriminatory and could be applied to all population groups.

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?

The preliminary recommendations are worded to promote equality of access through the provision of appropriate interventions, systems and processes taking into account the individual needs, preferences and wishes of person and/or their family members or carers (as appropriate). 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 questions 3.1, 3.2 or 3.3, or otherwise fulfil NICE's obligation to advance equality?

As part of the development of the recommendations the Committee has considered issues of equality of access and equity of access to services, interventions, systems and processes, as set out in the preliminary recommendations. The preliminary recommendations encourage providers and commissioners of home care and health and social care practitioners to work across the current boundaries of health and social care to promote the safe and appropriate use of medicines for people receiving medicines support, as part of their agreed home care plan.

It is anticipated that implementation of this guideline will lead to an increased level of support for people to take and look after their medicines, through greater involvement in decision- making, better assessment of medicines support needs, clearer roles and responsibilities for health and social care practitioners and enhanced communication between services and people receiving social care in the community.

Completed by Developer: Johanna Hulme, Guideline Lead

Date: 14/09/2016

Approved by NICE quality assurance lead: Sharon Summers-Ma

Date: 24/10/2016