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NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE quality standards

Equality impact assessment

Lyme disease

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

1. TOPIC ENGAGEMENT STAGE

1.1 Have any potential equality issues been identified during this stage of the development process?
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People who are pregnant are not able to receive all types of treatment available to treat Lyme disease. Their care will therefore be considered during the development of the quality standard.

Erythema migrans occurs in around two thirds of cases. Healthcare professionals should be aware that it may be more difficult to identify erythema migrans in people with darker skin tones, which may be of particular relevance to people in black, Asian and minority ethnic groups.

1.2 Have any population groups, treatments or settings been excluded from coverage by the quality standard at this stage in the process. Are these exclusions justified – that is, are the reasons legitimate and the exclusion proportionate?
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No population groups, treatments or settings have been excluded at this stage.
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Completed by lead technical analyst Rachel Gick

Date 03/10/2018

Approved by NICE quality assurance lead Mark Minchin

Date 03/10/2018

1.0.7 DOC EIA

2. PRE-CONSULTATION STAGE

2.1 Have any potential equality issues been identified during the development of the quality standard (including those identified during the topic engagement process)? How have they been addressed?

Re 1.1: The QSAC agreed that reviewing antibiotic treatments to be taken by women who are or may be pregnant is part of standard clinical practice. This area was not, as a consequence, identified as an area for quality improvement for this quality standard.

Draft statement 4 on raising awareness of Lyme disease contains an equality and diversity consideration about providing information. It refers to the importance of providing people with information that can be easily read and understood, and in formats to suit their needs and preferences, and that is culturally appropriate. This information also includes a reference to the NHS Accessible Information Standard.

People who are homeless, especially in rural areas, may be at increased risk of exposure to ticks.

The committee recognised that erythema migrans is difficult to diagnose. Healthcare professionals should be aware that it may be more difficult to identify erythema migrans in people with darker skin tones, which may be of particular relevance to people in black and minority ethnic groups. This will therefore be considered during the development of the quality standard, has been included for draft statement 1.

2.2 Have any changes to the scope of the quality standard been made as a result of topic engagement to highlight potential equality issues?

No changes have been made to the scope of the quality standard at this stage.

2.3 Do the draft quality statements 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?

See 2.1, regarding statement 4. Otherwise, no.

2.4 Is there potential for the draft quality statements to have an adverse impact on people with disabilities because of something that is a consequence of the disability?

See 2.1, regarding statement 4. Otherwise, no.

1.0.7 DOC EIA

2.5 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 2.1, 2.2 or 2.3, or otherwise fulfil NICE's obligation to advance equality?

None identified.

Completed by lead technical analyst Rachel Gick

Date 11 February 2019

Approved by NICE quality assurance lead Mark Minchin

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1.0.7 DOC EIA

3. POST CONSULTATION STAGE

3.1 Have any additional potential equality issues been raised during the consultation stage, and, if so, how has the committee addressed them?

In addition to the equality considerations to provide information in an accessible format as highlighted in statement 4, the committee felt that the quality standard would help to address the perception that risk of contracting Lyme disease / contact with infected ticks varies according to geographical area.

3.2 If the quality statements have changed after the consultation stage, are there any that 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.

3.3 If the quality statements have changed after consultation, is there potential for the recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?

No.

3.4 If the quality statements have changed after consultation, 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 and 3.3, or otherwise fulfil NICE's obligations to advance equality?

No.

Completed by lead technical analyst Rachel Gick

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1.0.7 DOC EIA

4. After Guidance Executive amendments – if applicable

4.1 Outline amendments agreed by Guidance Executive below, if applicable:
N/A

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Date 13 June 2019

Approved by NICE quality assurance lead Mark Minchin

Date 13 June 2019

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