# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## HEALTH AND SOCIAL CARE DIRECTORATE

## **QUALITY STANDARDS**

**Quality standard topic:** Children and young people with cancer **Output:** Equality analysis form – Prioritisation

### Introduction

As outlined in the <u>Quality Standards process guide</u> (available from <u>www.nice.org.uk</u>), NICE has a duty to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations between people from different groups. The purpose of this form is to document the consideration of equality issues in each stage of the development process before reaching the final output that will be approved by the NICE Guidance Executive. This equality analysis 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, i.e. not just population groups sharing the 'protected characteristics' defined in the Equality Act but also those affected by health inequalities associated with socioeconomic factors or other forms of disadvantage. The table does not attempt to provide further interpretation of the protected characteristics. This is because it is likely to be simpler, and more efficient, to use the evidence underpinning the quality standard to define population groups within the broad protected characteristic categories rather than to start with possibly unsuitable checklists created for other purposes, such as social surveys or HR monitoring tools.

The form should be used to:

- confirm that equality issues have been considered and identify any relevant to the topic
- ensure that the quality standards outputs do not discriminate against any of the equality groups
- highlight planned action relevant to equality
- highlight areas where quality standards may advance equality of opportunity.

This form is completed by the NICE quality standards internal team at each stage within the development process:

- Topic –Overview (to elicit additional comments as part of active stakeholder engagement)
- Quality Standards Advisory Committee prioritisation meeting
- Quality Standards Advisory Committee post consultation meeting

### Table 1

Protected characteristics
Age
Disability
Gender reassignment
Pregnancy and maternity
Race
Religion or belief
Sex
Sexual orientation
Other characteristics
Socio-economic status
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 (e.g. the North/South divide, urban versus rural).
Marital status (including civil partnership)

#### Other categories

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 are identifiable depends on the guidance topic and the evidence. The following are examples of groups covered in NICE guidance:

- Refugees and asylum seekers
- Migrant workers
- Looked after children
- Homeless people.

## Quality standards equality analysis

### **Stage: Prioritisation**

### Topic: Children and young people with cancer

- 1. Have any equality issues impacting upon equality groups been identified during this stage of the development process?
  - Please state briefly any relevant equality issues identified and the plans to tackle them during development.

Statement 2 references teenagers and young people being seen by an age specific MDT. This is due to the fact that the QSAC identified an issue that was highlighted in the review of current practice that teenagers and young people were being seen by adult services that were not necessarily taking into consideration the wider psychological and social needs of teenagers and young people. This was not an issue for children as the children's multidisciplinary teams included professionals that considered these needs. It is therefore anticipated that this statement will help overcome this inequality.

- 2. Have relevant bodies and stakeholders been consulted, including those with a specific interest in equalities?
  - Have comments highlighting potential for discrimination or advancing equality been considered?

Standing members for Quality Standards Advisory Committees (QSACs) have been recruited by open advert with relevant bodies and stakeholders given the opportunity to apply. In addition to these standing committee members, specialist committee members from a range of professional and lay backgrounds relevant to children and young people with cancer have been recruited. These include; a lay member, a specialist nurse, a paediatric oncologist and a paediatric haematologist. The draft quality standard will be published and wide stakeholder comment invited, including from those with a specific interest in equalities.

- 3. Have any population groups, treatments or settings been excluded from coverage by the quality standard at this stage in the process? Are these exclusions legal and justified?
  - Are the reasons for justifying any exclusion legitimate?

The quality standard will exclude adults as the referral is specifically concerned with services for children and young people with cancer. However, in line with the primary evidence source there isn't a specific upper age limit for the standard as it is recognised that services should be flexible to the specific needs of individuals who may wish to or need to continue accessing paediatric services after they have become 18 years old.

- 4. If applicable, do any of the quality statements make it impossible or unreasonably difficult in practice for a specific group to access a service or element of a service?
  - Does access to a service or element of a service depend on membership of a specific group?
  - Does a service or element of the service discriminate unlawfully against a group?
  - Do people with disabilities find it impossible or unreasonably difficult to receive a service or element of a service?

The quality standard refers to access to specialist services for cancer. It should be noted that for people who may find it difficult to travel long distances due to financial or other characteristics provision should be available to facilitate their access to services.

#### 5. If applicable, does the quality standard advance equality?

• Please state if the quality standard, including statements, measures and indicators, as described will advance equality of opportunity, for example by making access more likely for certain groups, by tailoring the service to certain groups, or by making reasonable adjustments for people with disabilities?

Several statements are concerned with improving access to relevant services for all children and young people with cancer.