

**NATIONAL INSTITUTE FOR HEALTH AND
CARE EXCELLENCE**

HEALTH AND SOCIAL CARE DIRECTORATE

QUALITY STANDARDS

Quality standard topic: Alcohol: preventing harmful alcohol use in the community

Output: Equality analysis form Meeting 1

Introduction

As outlined in the [Quality Standards process guide](http://www.nice.org.uk) (available from www.nice.org.uk), 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 – meeting 1
- Quality Standards Advisory Committee – meeting 2

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: Meeting 1

Topic: Alcohol: preventing harmful alcohol use in the community

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.

The quality standard aims to ensure that effective interventions are provided to all groups of people within the population.

Alcohol outlets being more numerous in socially deprived areas was raised by the committee. Failure to implement an effective local licensing policy and identify and take action against premises selling alcohol to people who are under age will potentially have the greatest adverse effect on people who live in these areas, including people from poorer socioeconomic backgrounds. This may include higher than average proportions of people with protected characteristics, including people from minority ethnic groups. This issue has been highlighted in the relevant statements (statements 1 and 2).

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 preventing harmful alcohol use in the community have been recruited. The topic overview and request for areas of quality improvement were published and wide stakeholder comment invited, including from those with a specific interest in equalities. These suggested areas of quality improvement were then considered at the QSAC meeting attended by standing committee and specialist committee members.

The draft quality standard will be published for a 4 week stakeholder consultation period in July 2014 where further comment will be invited from stakeholders.

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 covers adults, young people and children. The lower age range of children will be 5 years of age, as determined by NICE public health guidance 7, which covers children and young people in educational institutions, including primary school.

The quality standard covers the prevention of harmful alcohol use in the community, and will therefore exclude, for example, interventions provided in hospitals, which are covered by Alcohol dependence and harmful alcohol use (NICE quality standard 11).

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?

These statements do not make it difficult for any specific groups to access an intervention.

Statement 2 on preventing underage sales specifically covers the prevention of alcohol sales to children and young people aged under 18 years, in keeping with the ages set out by the law on alcohol sales. Statement 3 covers school-based approaches to alcohol and so relates to children and young people in educational institutions, including primary school, with the lower age range being 5 years of age. However, the statement states that a 'whole school' approach to alcohol should be used, which includes parents and carers, teachers, pupils, governors and the wider community.

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?

By covering population-level approaches to preventing harmful alcohol use in the community the quality standard will advance equality of opportunity for all groups, including groups with protected characteristics.

Statement 1 is about using local crime and trauma data to identify alcohol-related problems before making licensing policies. This will enable identification of areas where there are problems, including deprived areas, when considering decisions about licensed premises in the area.

6. Is an alternative format of the Information for the Public needed e.g. large font, easy read?

No requirement identified at this stage.