

THE BRITISH THORACIC SOCIETY
NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE
SCOTTISH INTERCOLLEGIATE GUIDELINES NETWORK

Equality impact assessment

Asthma: diagnosis, monitoring and chronic asthma management

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

1.0 Checking for updates and scope: before scope consultation (to be completed by the Developer and submitted with the draft scope for consultation)

1.1 Is the proposed primary focus of the guideline a population with a specific communication or engagement need, related to disability, age, or other equality consideration?

If so, what is it and what action might be taken by BTS/NICE/SIGN or the developer to meet this need? (For example, adjustments to committee processes, additional forms of consultation.)

No

1.2 Have any potential equality issues been identified during the check for an update or during development of the draft scope, and, if so, what are they?

Yes see below

- Age

- Disability
- Gender reassignment
- Pregnancy and maternity
- Race
- Religion or belief
- Sex
- Sexual orientation
- Socio-economic factors
- Other definable characteristics (these are examples):
 - refugees
 - asylum seekers
 - migrant workers
 - looked-after children
 - people who are homeless
 - prisoners and young offenders
 - any others identified

Socio-economic factors need to be considered with some families (in particular those in the lower socio-economic groups), for example due to exposure to poorer air quality, having poorer outcomes.

Race was noted with reported ethnic variation in asthma frequency. In the UK, people of South Asian origin with asthma experience excess morbidity, with hospitalisation rates three times those of the majority White population and evidence suggests that South Asian children with asthma are more likely to suffer uncontrolled symptoms and hospital admissions with acute asthma compared to White British children.

It was noted that people with cognitive impairment, learning disabilities, people with language and communication difficulties and people with mental health difficulties need to be considered in development of this guideline. These were identified as important groups to consider within the development of scope at the stakeholder

workshop. These groups may experience poorer outcomes due to for example low adherence to treatment.

Although not a protected characteristic, the committee also highlighted geographical variation, especially in relation to urban and rural locations. Rural areas often have smaller primary care practice with asthma management lead by a practice nurse rather than a specialist asthma nurse. Rural locations often have reduced access to tertiary healthcare for more specialist treatment. However conversely children in rural areas also benefit from lower levels of air pollution which has been shown to worsen asthma symptoms.

1.3 What is the preliminary view on the extent to which these potential equality issues need addressing by the Committee?

In people of South Asian origin research has shown that further efforts are required to raise awareness of symptoms and effectively communicate how, when and where to seek help for children. There is a need for improved diagnosis and consistent, effectively communicated information, especially regarding medication. A question has been added to the consultation documents asking stakeholders if they are aware of any research in this area.

People with cognitive impairment, learning disabilities, people with language and communication difficulties and people with mental health difficulties may need additional help with their self-management to improve factors such as inhaler technique and adherence. None of the afore mentioned groups will be excluded from the evidence reviews and recommendations will be tailored to address their needs as appropriate.

Consideration will be given to people living in rural locations when making the recommendations, for example with respect to what services they may have access to locally.

Completed by Developer: Sharon Swain
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Approved by BTS quality assurance lead: Sally Welham
Date: 01.09.2021

Approved by NICE quality assurance lead: Kay Nolan
Date: 25.08.21

Approved by SIGN quality assurance lead: Roberta James
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