

# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## NICE guidelines

### Equality impact assessment

#### Joint replacement (primary): hip, knee and shoulder

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

#### 3.0 Guideline development: before consultation (to be completed by the Developer before consultation on the draft guideline)

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

Age and cognitive impairment were identified in the scope as areas with potential equality issues.

Age was included in all discussions of the evidence and during the formulation of recommendations. It was utilised as a subgroup in most of the review protocols in case of inconsistency in the evidence. Age was particularly prominent in the formulation of shoulder joint replacement surgery where it was considered a surrogate for various clinical and lifestyle factors. It was also considered a potential influence on a person's choice of the type of replacement, a younger person may opt for a replacement that lasts longer.

People with cognitive impairment were additionally considered during each discussion. Discussion for the outpatient rehabilitation after hip or knee replacement surgery led to a recommendation for this specific population group.

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?

No other equality issues have been identified

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3.3 Have the Committee's considerations of equality issues been described in the guideline for consultation, and, if so, where?

Equality issues are discussed in the committee's discussion of the evidence section of the review chapters. Including: information needs, decision aids and long-term monitoring and follow up.

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?

The draft recommendations are not considered to create difficulties for specific groups to access services.

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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 draft recommendations are not considered to have an adverse impact on people with disabilities.

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?

Not applicable to this guideline

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Date: 7 August 2019

Approved by NICE quality assurance lead: Kay Nolan

Date: 28 August 2019