NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

INTERVENTIONAL PROCEDURES PROGRAMME

Equality impact assessment

IPG655 Cardiac contractility modulation device implantation for heart failure

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

Briefing

1. Have any potential equality issues been identified during the briefing process (development of the brief or discussion at the committee meeting), and, if so, what are they?

Age: the prevalence of heart failure increases steeply with age.

Gender: heart failure is more common in men than women.

Ethnicity: Ischaemic heart disease and hypertension are more prevalent in people of Afro-Caribbean and South Asian descent. Both conditions are notable causes of heart failure.

Socioeconomic status: heart failure is more common in people from lower socioeconomic status.

Disability: patients may be covered by the Equality Act 2010 under disability if their heart failure has had a substantial adverse impact on normal day to day activities for over 12 months, or is likely to do so. Many patients with heart failure are elderly and have multiple co-morbidities.

2. What is the preliminary view as to what extent these potential equality issues need addressing by the committee? (If there are exclusions listed in the brief (for example, populations, treatments or settings), are these justified?)

This was not thought to have an impact on the assessment of the procedure. No exclusions were applied.

3. Has any change to the brief (such as additional issues raised during the committee meeting) been agreed to highlight potential equality issues?

No

4. Have any additional stakeholders related to potential equality issues been identified during the committee meeting, and, if so, have changes to the stakeholder list been made?'

No

Kevin Harris

Approved by Programme Director and Clinical Advisor

Date: 02/05/2019

Consultation

1. Have the potential equality issues identified during the briefing process been addressed by the committee, and, if so, how?

No specific data relating to the potential issues mentioned earlier was identified in the literature presented in the overview. The published evidence reflected that the indication is more common in men than women and the mean age in the studies ranged from 52 to 66 years.

2. Have any other potential equality issues been raised in the overview, specialist adviser questionnaires or patient commentary, and, if so, how has the committee addressed these?

No		
3.	Have any other potential equality issues been identified by the committee, and, if so, how has the committee addressed these?	
No		
4.	Do the preliminary recommendations make it more difficult in practice for a specific group to access a technology or intervention compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?	
No		
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?	
Not applicable		
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6.	Are there any recommendations or explanations that the committee could make to remove or alleviate barriers to, or difficulties with, access identified in questions 4 or 5, or otherwise fulfil NICE's obligation to promote equality?	
Not applicable		

7. Have the committee's considerations of equality issues been described in the consultation document, and, if so, where?

No		
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approved by Programme Director and Clinical Advisor		
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inal	interventional procedures document	
1.	Have any additional potential equality issues been raised during the consultation, and, if so, how has the committee addressed these?	
No		
2.	If the recommendations have changed after consultation, are there any recommendations that make it more difficult in practice for a specific group to access a technology or intervention compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?	
Not a	applicable	
3.	If the recommendations have changed after consultation, 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?	
Not a	applicable	

4. If the recommendations 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

identified in questions 2 and 3, or otherwise fulfil NICE's obligations to promote equality?

Not applicable

5. Have the committee's considerations of equality issues been described in the final interventional procedures document, and, if so, where?

No

Mirella Marlow

Approved by Programme Director

Date: 8 May 2019