## NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

#### INTERVENTIONAL PROCEDURES PROGRAMME

## **Equality impact assessment**

# IPG685 Self-expanding implant insertion into the intersphincteric space for faecal incontinence

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?

Frail older people are a group at high-risk of this condition.

Many people with long term faecal incontinence needing treatment are likely to be covered under the Equality Act 2010 because of disability. A high-risk of faecal incontinence occurs in a number of conditions likely to be covered by the Act: neurological or spinal disease/injury (such as spina bifida, stroke, multiple sclerosis, spinal cord injury) and severe cognitive impairment (such as dementia and learning disabilities). Urinary incontinence is also related to faecal incontinence and a combination of these is likely to increase the chances that an individual fulfils the criteria of having a disability.

If the procedure is effective, it has the potential to significantly improve quality of life and enable participation in normal life activities.

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: 08/12/2020

#### Consultation

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

Where reported, the mean age ranged from 56 to 66 years (4 studies) and median age ranged from 58 to 69 years (2 studies). Overall, there was a higher proportion of females than males included in the studies (range from 50% to 100%).

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 a	pplicable
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 a	pplicable

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

No	
Kevin Harris	
Appro	oved by Programme Director and Clinical Advisor
Date:	08/12/2020
Final	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	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?
	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

#### **Kevin Harris**

**Approved by Programme Director and Clinical Advisor** 

**Date:** 08/12/2020