

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

DIAGNOSTICS ASSESSMENT PROGRAMME

Equality impact assessment – Scoping

Quantitative faecal immunochemical tests to guide colorectal cancer pathway referral in primary care

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

1. Have any potential equality issues been identified during the scoping process (scoping workshop discussion, assessment subgroup discussion), and, if so, what are they?

During scoping it was noted that older people and Jewish people of central and eastern European family origin are at increased risk of colorectal cancer. People with cancer are protected under the Equality Act 2010 from the point of diagnosis.

It was identified that the test may not be suitable for people using medicines or with conditions that increase the risk of gastrointestinal bleeding and people with blood disorders, for example sickle beta thalassaemia, in whom faecal haemoglobin may be difficult to detect.

People with physical or cognitive disabilities may need support to obtain and submit a stool sample using the collection devices, or to understand the purpose of the test and the implications of the test results.

Faecal haemoglobin concentrations may be greater in men than women and may also increase with age. Test thresholds may therefore vary according to age and sex.

Cultural or demographic preferences may influence the acceptability of tests that require collection of a stool sample. Experience from the bowel cancer screening programme indicates that socioeconomic factors can also act as barriers to engaging with FIT programmes.

2. What is the preliminary view as to what extent these potential equality issues need addressing by the committee?

The disease is characterised by a difference in prevalence between groups of people. This disease characteristic cannot be addressed within a NICE assessment, but investigation of the effect of increased prevalence in certain subgroups may help the committee in their decision making. Depending on the availability of evidence, the External Assessment Group (EAG) will consider whether faecal haemoglobin levels may vary according to age and sex, and if different test thresholds might be appropriate. In addition, the EAG will consider the utility of the test in people with blood disorders and people taking medications or with conditions which increase the risk of gastrointestinal bleeding.

If data permits, the EAG will investigate the effect of cultural, demographic or socioeconomic factors on uptake of FIT which may also help the committee in their decision making.

3. Has any change to the draft scope been agreed to highlight potential equality issues?

Subgroups for age, sex, ethnicity, people with blood disorders, people taking medications or with conditions that increase the risk of gastrointestinal bleeding, and anaemia will be included in the analysis if evidence permits.

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

No additional stakeholders have been identified.

Approved by Associate Director (name): Rebecca Albrow.

Date: 10/11/2022