

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Equality impact assessment

Digital technologies to support monitoring of vision change at home for people with age-related macular degeneration

Scoping

1 Have any potential equality issues been identified during the scoping process? If so, what are they?

There are some equality issues relating to age related macular disease (AMD):

- AMD can cause visual impairment, which can be considered a disability under the Equality Act. Some people with age-related macular degeneration are eligible to be registered as sight impaired or severely sight impaired. People with a greater degree of visual impairment may not be able to use the technologies.
- The likelihood of developing AMD increases with age ([Macular Society, 2026](#)). AMD usually first affects people in their 50s ([NHS, 2026](#)). While digital tools have the potential to increase access to monitoring, digital literacy should be taken into account.
- AMD is more common in white ethnic groups compared to people from other ethnic groups ([Vanderbeek et al., 2011](#), [Wong et al., 2014](#)).
- Reports suggest that people with a learning disability are 10 times more likely to experience serious sight loss than other people in the general population ([Donaldson et al., 2023](#)). People with a learning

disability may experience potential barriers to care that could lead to the delayed detection and treatment of AMD. These may include:

- not being aware of the importance of eye testing
 - difficulties understanding and processing information
 - memory of previous poor experiences
 - needing to interact with strangers.
- Some people may need additional support to use digital technologies, including:
 - people with visual impairment,
 - people with hearing difficulties,
 - people with cognitive impairment,
 - people who have problems with manual dexterity,
 - people who have a learning disability,
 - neurodivergent people.

2 Have any potential health inequality issues been identified during the scoping process? If so, what are they?

- Risk factors for age-related macular degeneration include age, living with overweight or obesity, smoking, high blood pressure and family history of AMD ([NHS, 2025](#)).
- People from the most deprived areas are more likely to develop age-rated macular degeneration and often have poorer outcomes compared to people from the least deprived areas ([Moore et al., 2025](#); [Qu et al., 2024](#); [Yip et al., 2015](#); [Qu et al., 2024](#));).
- People who live further away from hospital may experience a greater burden associated with cost and time required to travel to hospital appointments than people who live closer to hospital. People who do not get paid time off from employment for medical appointments will

be financially disadvantaged if they need to attend regular appointments. Digital technologies would be used as an adjunct to usual care, so they would not necessarily replace in-person appointments.

- Using digital technologies requires a certain level of health literacy and familiarity with digital tools. People with lower digital literacy or limited access to technology may struggle to access the benefits of a digital offering or navigate the digital interfaces, leading to disparities in utilisation and health outcomes.
- People who are unable to read or understand health-related information including people who cannot read English may need additional support to use digital technologies. There is a risk of widening health inequalities if technologies require personal device ownership, digital literacy or English fluency

3 What is the preliminary view as to what extent the committee needs to address the potential issues set out in questions 1 and 2?

The potential equality issues will be noted by the committee and inform decision making where appropriate.

4 Has any change to the draft scope been agreed to highlight the potential issues set out in questions 1 and 2?

The potential equalities issues have been included in the equalities section of the draft scope.

5 Has the stakeholder list been updated as a result of additional equality or health inequality issues identified during the scoping process?

No

Approved by Associate Director: Rebecca Albrow

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