# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

#### INTERVENTIONAL PROCEDURES PROGRAMME

## **Equality impact assessment**

# IPG699 Laser lithotripsy for difficult-to-treat bile duct stones

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: Gallstones become more common with increasing age. About 8% of the population aged over 40 years in the UK have gallstones, which rises to over 20% in those aged over 60.

Gender: Gallstones are more common in women than men.

Ethnicity: There is a high prevalence of gallstones in American Indian populations, a lower prevalence in Hispanic people and relatively low prevalence in people from Africa and Asia.

Disability: Patients with difficult-to-treat bile duct stones may meet the criteria for disability in the Equality Act 2010 if their symptoms have a substantial adverse effect on day to day activities for longer than 12 months or are likely to do so.

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: 05/05/2021

#### Consultation

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

The literature showed that, where reported, the mean age of patients ranged from 43 to 76 years and 50% or more were female in most of the studies. No specific data relating to other issues mentioned earlier were identified in the literature presented in the overview.

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		
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	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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inal i	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	pplicable

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: 05/05/2021