NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

INTERVENTIONAL PROCEDURES PROGRAMME

Equality impact assessment

IPG719 Endoscopic balloon dilation for subglottic or tracheal stenosis

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?
 - Endoscopic balloon dilation for subglottic or tracheal stenosis may be more commonly performed in babies, children, and young people.
 - A small proportion of people with subglottic or tracheal stenosis have a congenital aetiology.
 - Some people with subglottic or tracheal stenosis may be covered by the equalities legislation.
- 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? |
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| No. | |
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| 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. | |
| | 0/01/2022 ultation |
| 1. | Have the potential equality issues identified during the briefing process been addressed by the committee, and, if so, how? |
| • | The majority of the literature presented in the overview was on the use of this procedure in children and young people. In 1 study, the cause of stenosis was congenital in 27% of people. |
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| 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. | | |
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| 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? | |
| Yes, the guidance recommends that: | | |
| • | For babies, children, and young people, this procedure can be used with standard arrangements for clinical governance, consent and audit. | |
| • | For adults, this procedure can only be used with special arrangements for clinical governance, consent, and audit or research. | |
| 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? | |
| | | |

The guidance was different for babies, children, and young people, and adults because there was more evidence of efficacy for this procedure in babies, children, and young people.

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

No.

Kevin Harris

Approved by Programme Director and Clinical Advisor

Date: 10/01/2022

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?

Equality impact assessment IP: IPG719

Not 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.

Anastasia Chalkidou

Associate Director

Date: 10/01/2022