NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

INTERVENTIONAL PROCEDURES PROGRAMME

Equality impact assessment

IPG762 Intramuscular diaphragm stimulation for ventilator-dependent chronic respiratory failure from high spinal cord injuries

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 and sex: According to the World Health Organization, males are most at risk in young adulthood (20 to 29 years) and older age (70+). Females are most at risk in adolescence (15 to 19 years) and older age (60+). Studies report male-to-female ratios of at least 2:1 among adults, sometimes much higher.

Disability: People with spinal cord injuries are likely to be covered by disability under the Equality Act 2010.

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		
Consultation		
1.	Have the potential equality issues identified during the briefing process been addressed by the committee, and, if so, how?	
Where reported, the evidence considered by the committee included a higher proportion of males than females. The mean age ranged from 22 to 39 years.		
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 applicable

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

The consultation document included the following statement in the section 'why the committee made these recommendations':

'High spinal cord injury is severely disabling. For people who are dependent on mechanical ventilation, this procedure offers one of few options that could enable them to have ventilator-free time. So, this procedure is recommended but only with special arrangements.'

Amy Crossley

Health Technology Assessment Adviser

Date: 15/03/2023

Equality impact assessment IP: IPG762

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?	
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?

The final interventional procedures document includes the following statement in the section 'why the committee made these recommendations':

'High spinal cord injury is severely disabling. For people who are dependent on mechanical ventilation, this procedure offers one of few options that could enable them to have ventilator-free time. So, this procedure is recommended but only with special arrangements.'

Anastasia Chalkidou

Associate Director

Date: 24/03/2023