NATIONAL INSTITUTE FOR HEALTH AND CARE **EXCELLENCE**

INTERVENTIONAL PROCEDURES PROGRAMME

Equality impact assessment

IPG776 Extracorporeal carbon dioxide removal for acute respiratory failure

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?	
No.		
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?)	
Not applicable.		
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.	
Consu	ıltation

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

Not applicable.

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?

An expert at the committee meeting said that there is evidence that people from minority ethnic backgrounds are more likely to be admitted to intensive care services in the UK than people from a white background. This procedure can only be done in an intensive care service. The committee did not feel that changes to the overview or recommendations were needed to address this.

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?

A 'do not do' recommendation was made for the subgroup of people with hypoxic respiratory failure and a research only recommendation was made for people with hypercapnic respiratory failure. An expert at committee said that the incidence of COPD is related to smoking, which differs by socioeconomic and ethnic background. COPD is associated with hypercapnic respiratory failure. The committee noted that trials in people with hypercapnic respiratory failure are ongoing in section 3.6 of the guidance. The aim of the procedure is to enable lung protective ventilation settings to be used but does not replace the need for ventilation. The committee did not believe that these recommendations would leave people with hypoxic respiratory failure without a treatment option because treatments are available in this group.

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?

No.

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

No.	
Amy (Crossley
Health	n Technology Assessment Adviser
Date:	14/09/2023
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?

No

Anastasia Chalkidou

Associate Director

Date: 09/10/2023