NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Medical technologies evaluation programme Equality impact assessment: Guidance development MT539 3C Patch for treating diabetic foot ulcers

The impact on equality has been assessed during this evaluation according to the principles of the <u>NICE Equality scheme</u>.

Medical technology consultation document

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

Equality considerations identified during scoping were that 3C Patch requires blood to be taken weekly and may not be suitable for people who are unable to provide blood samples, including people with trypanophobia (fear of needles). 3C Patch is intended for people with diabetes. In some cases, diabetes can be considered a disability. People of South Asian, African and African Caribbean family origin are more at risk of diabetes, however there is no evidence that the prevalence of diabetic foot ulceration and amputation is higher in these subgroups than in the general population of people with diabetes in the UK. Disability and race are protected characteristics under the 2010 Equalities Act.

The committee acknowledged that there is an unmet need in treating people who have diabetic foot ulcers that are not healing despite standard care and acknowledged that this treatment option may not be suitable for everyone (section 4.1 of the MTCD).

2.	Have any other potential equality issues been highlighted in the sponsor's submission, or patient organisation questionnaires, and, if so, how has the committee addressed these?

None identified.

3. Have any other potential equality issues been identified by the committee and, if so, how has the committee addressed these? The committee acknowledged that mobility can be a problem for some people with diabetic foot ulcers. For these people, treatments that are available in a community setting may be easier to access than 3C Patch. The challenge of needing weekly visits to secondary care due to difficulties with transportation is mentioned in 4.1 of the MTCD. 4. Do the preliminary recommendations make it more difficult in practice for a specific group to access the technology compared with other groups? If so, what are the barriers to or difficulties with access for the specific group? No. 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? No. **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 obligations to promote equality? N/A 7. Have the committee's considerations of equality issues been described in the medical technology consultation document, and, if so, where? Section 4.1 addressed equality considerations.

Approved by Associate Director: Anastasia Chalkidou

Date: 07/07/2021 Medical technology guidance document 1. Have any additional potential equality issues been raised during the consultation, and, if so, how has the committee addressed these? 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 the technology compared with other groups? If so, what are the barriers to access for the specific group? 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?

4. If the recommendations have changed after consultation, are there any recommendations or explanations that the committee could make to

Date:		
Δnn	roved by Programme Director:	
5.	Have the committee's considerations of equality issues been described in the medical technology guidance document, and, if so, where?	
	equality?	
	questions 2 and 3, or otherwise fulfil NICE's obligations to promote	
	remove or alleviate barriers to, or difficulties with, access identified in	