NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE guidelines

Equality impact assessment

Macular degeneration: diagnosis and management of agerelated macular degeneration

The impact on equality has been assessed during guidance development according to the principles of the NICE equality policy.

4.0 Final guideline (to be completed by the Developer before GE consideration of final guideline)

4.1 Have any additional potential equality issues been raised during the consultation, and, if so, how has the Committee addressed them?

One stakeholder suggested that specific provision should be made for people with learning disabilities, especially as regards their information needs, suggesting that this group are at an increased risk of developing sight problems. The committee discussed this, and concluded that:

- While there is an association between learning difficulties and many causes of visual impairment, there is no particular association with macular degeneration; therefore, no greater prevalence of learning disability should be expected in this population.
- Recommendations have been reinforced to make reference to multiple sources of generic guidance that provide recommendations and specify duties for professionals treating people with learning disabilities. These are:
 - NICE's guideline on <u>Patient experience in adult NHS services</u>
 - NICE's guideline on <u>Multimorbidity: clinical assessment and</u> management
 - NHS England's <u>Accessible Information Standard</u>

One stakeholder comment noted that a subtype of macular degeneration (polypoidal

4.1 Have any additional potential equality issues been raised during the consultation, and, if so, how has the Committee addressed them?

choroidal vasculopathy; PCV) is more prevalent in people with certain family origins. As some people believe that photodynamic therapy (PDT) is an effective treatment for PCV, some might argue that the guideline's negative recommendations about PDT effectively discriminate against people according to ethnicity. However, the committee agreed that PDT had not been shown to be an effective therapy in PCV or any other type of macular degeneration. Therefore, no inequality was introduced by the recommendations.

4.2 If the recommendations have changed after consultation, are there any recommendations that make it more difficult in practice for a specific group to access services compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?

No

4.3 If the recommendations have changed after consultation, is there potential for the recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?

No

4.4 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 to services identified in questions 4.1, 4.2 and 4.3, or otherwise fulfil NICE's obligations to advance equality?

No

4.5 Have the Committee's considerations of equality issues been described in the final guideline, and, if so, where?	

Updated by Developer: Susan Spiers

Date: 02.10.2017

Approved by NICE quality assurance lead: Christine Carson

Date: 09.10.17