

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

DIAGNOSTICS ASSESSMENT PROGRAMME

Equality impact assessment – Scoping

Devices for remote continuous monitoring of people with Parkinson's disease

The impact on equality has been assessed during this assessment according to the principles of the NICE Equality scheme.

- 1. Have any potential equality issues been identified during the scoping process (scoping workshop discussion, assessment subgroup discussion), and, if so, what are they?**

Potential equality issues were discussed both in the scoping workshop 6th January 2022 and in the assessment subgroup meeting 18 January 2022.

The following were identified as potential equality issues relating to the condition:

- People with Parkinson's disease may be classified as having a disability and therefore protected under the Equality Act 2010 from the point of diagnosis.
- Most people with Parkinson's start to develop symptoms when they're over 50, although around 1 in 20 people with the condition first experience symptoms when they're under 40.
- Incidence of Parkinson's disease may vary by ethnicity.
- Parkinson's disease is more common in men than in women.
- People with Parkinson's disease from the black, Asian and minority ethnic community may have an atypical pattern of Parkinson's disease that is not often recognised by healthcare professionals (NICE MIB258).

The following were identified as potential equality issues relating to the testing:

- The technology may offer additional value to people experiencing problems communicating their symptoms. This may include people with

language barriers, people with recall problems and people who live alone who may not notice changes in their symptoms. This could benefit people with cognitive disorders and people who do not speak English as a first language.

- Training materials and technology outputs, such as reports or displays, may not be as easy to understand for someone whose first language is not English, and if equivalent documentation in their first language is not available.
- People who are frail or have cognitive impairment or both may struggle to use the technology.
- The technology is not suitable, or may not work as well, for people who have restricted movement, for example people who are bed bound or wheelchair users.
- If enabling greater use of remote assessment, the technology may improve health outcomes for people in more rural or remote settings.
- Wider availability of remote appointments may also allow greater access to care for people who are less able to afford travel to in-person appointments.

2. What is the preliminary view as to what extent these potential equality issues need addressing by the committee?

The potential equality issues will be considered by committee during decision making.

3. Has any change to the draft scope been agreed to highlight potential equality issues?

The potential equality issues have been included in the equalities section of the scope. Ethnicity and people with communication barriers, has been highlighted as subgroups that should be considered where data permits.

4. Have any additional stakeholders related to potential equality issues been identified during the scoping process, and, if so, have changes to the stakeholder list been made?

No additional stakeholders related to potential equality issues have been identified during the scoping process.

Approved by Associate Director (name): Rebecca Albrow

Date: 28 January 2022