

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

DIAGNOSTICS ASSESSMENT PROGRAMME

Equality impact assessment – Scoping

Novel home-testing devices for diagnosing obstructive sleep apnoea/ hypopnea syndrome

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?
 - OSAHS is more prevalent in people who are overweight or obese, people with COPD, pregnant women and pregnant people and older people. Age, gender, pregnancy and maternity are protected characteristics under the Equality Act (2010)
 - People with the following conditions have higher prevalence of OSAHS: treatment-resistant hypertension, type 2 diabetes, cardiac arrhythmia, particularly atrial fibrillation, stroke or transient ischaemic attack, chronic heart failure, moderate or severe asthma, polycystic ovary syndrome, Down's syndrome, non-arteritic anterior ischaemic optic neuropathy, hypothyroidism, and acromegaly.
 - People with underlying conditions, for example, genetic disorders, neurodevelopmental and neuromuscular disorders, metabolic disease, craniofacial and skeletal disorders, can have a higher risk of developing OSAHS. Many people with OSAHS may be protected under the disability provision of the Equality Act (2010).
 - Access to the technology may be restricted in different populations due to Wi-Fi or smart phone requirements. This may mean practices in rural or socioeconomically deprived areas would be less able to adopt these devices as the population may not have access to a home wi-fi connection or a smartphone.
 - Some people may struggle to use smartphone apps associated with the technologies.

- People with different language needs (visually impaired, registered blind, or deaf) may have challenges with using devices at home.
 - People who are frail, have cognitive impairment or both may struggle to use technologies that require more user-input.
 - Technologies that use light-based assessment, such as photoplethysmography (PPG) sensors and/or pulse oximetry, may overestimate levels of oxygen in the blood for people with darker pigmentation and skin tones.
 - Some technologies may be contraindicated for people with pacemakers or other implantable devices, people with known or suspected arrhythmias, people with significant cardiopulmonary or neurological disorders, or people with a known allergy to acrylate.
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 noted by the committee and inform discussions where appropriate. The committee will need to consider the accessibility and usability of the technologies when making recommendations.

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

The following subgroups were added to the scope:

- People over 16
- Children and young people aged 16 and under*
- For children and young people aged 16 and under, with and without comorbidities (as defined in the BTS's guidelines for the diagnosis of sleep disordered breathing in paediatrics)
- People with COPD
- Pregnant women and pregnant people
- People who have neuromuscular disorders
- People from black, Asian and minority ethnic backgrounds

The potential equality issues have been included in the equalities section of the scope. This section of the scope has been updated after the scoping workshop and assessment subgroup meeting to reflect feedback and suggestions from attendees at these meetings.

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

Approved by Associate Director (name): Rebecca Albrow

Date: 27/04/2023