

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Medical technologies evaluation programme

Equality impact assessment: Topic selection and scoping

Digital technologies to support the delivery of pulmonary rehabilitation for adults with chronic obstructive pulmonary disease: early value assessment

The impact on equality has been assessed during this evaluation according to the principles of the [NICE Equality scheme](#).

1. Have any potential equality issues been identified during the development of the topic briefing note or during selection, and, if so, what are they?

Several potential equality issues have been identified in line with equality considerations for the included technologies. Key issues include:

- COPD is most common in people over 50. Men tend to be at higher risk of developing COPD than women. There is a higher prevalence of respiratory diseases in people from a lower socioeconomic background due to poorer living conditions and higher rates of smoking. People living in more disadvantaged areas also have a lower life expectancy than the general population. COPD is responsible for 8% of this difference in men and for 12% of this difference in women.
- Digital technologies to support pulmonary rehabilitation are accessed via a mobile phone, tablet, or computer. People will need regular access to a device with internet access to use the technologies. Additional support and resources may therefore be needed for people who are unfamiliar with digital technologies or people who do not have access to smart devices or the internet.
- People with visual, hearing, or cognitive impairment; problems with manual dexterity; a learning disability; a mental health condition; or who are unable to read or understand health-related information (including people who cannot read English) may need additional support to use digital technologies

that support pulmonary rehabilitation. Some people would benefit from their pulmonary rehabilitation to be delivered in languages other than English.

- People's ethnic, religious, and cultural background may affect their views of different types of pulmonary rehabilitation. For example, some people may not want to attend a mixed sex exercise class. Healthcare professionals should discuss the language and cultural content of digital technologies with patients before use.
- People with no fixed address or with a lack of physical space at home may find taking part in exercise aspects of digitally supported pulmonary rehabilitation difficult. These people should be supported through shared decision making to select the correct therapy option for them.

Age, disability, sex, race and religion or belief are protected characteristics under the Equality Act (2010).

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

The committee should consider all the equality issues when making recommendations. There is a pre-existing health inequality in prevalence of COPD by sex and by socioeconomic status. Access to pulmonary rehabilitation services may not be improved for those who are unable to engage with a digital technology due to a lack of accessibility, lack of equipment, unavailability of internet connection or lack of experience with computers or smartphones.

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

The potential equality issues were discussed at the scoping workshop. Stakeholders agreed with the potential issues that were raised and three additional equality issues were discussed: mixed sex exercise classes as part of face to face pulmonary rehabilitation not being acceptable for some people with COPD, not living at a permanent address, and people with mental health conditions in addition to COPD.

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 were identified during the scoping process.

Approved by Associate Director: Anastasia Chalkidou

Date: 1/08/2023