

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

INTERVENTIONAL PROCEDURES PROGRAMME

Equality impact assessment

IPG727 Synthetic cartilage implant insertion for first metatarsophalangeal joint osteoarthritis (hallux rigidus)

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

Briefing

1. Have any potential equality issues been identified during the briefing process (development of the brief or discussion at the committee meeting), and, if so, what are they?

Age: the risk of developing osteoarthritis increases with age.

Gender: osteoarthritis is more common in women than men.

Disability: people with first metatarsophalangeal osteoarthritis may be covered by the Equality Act if their condition has had a substantial adverse impact on normal day to day activities for over 12 months or is likely to do so.

Ethnicity: the prevalence of osteoarthritis and patterns of joint involvement vary among different racial and ethnic groups.

2. What is the preliminary view as to what extent these potential equality issues need addressing by the committee? (If there are exclusions listed in the brief (for example, populations, treatments or settings), are these justified?)

This was not thought to have an impact on the assessment of the procedure. No exclusions were applied.

3. Has any change to the brief (such as additional issues raised during the committee meeting) been agreed to highlight potential equality issues?

No

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

No

Kevin Harris

Approved by Programme Director and Clinical Advisor

Date: 31/03/2022

Consultation

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

The evidence considered by the committee reflected that the risk of developing osteoarthritis increases with age and that it is more common in women than men. The mean age of patients in most of the studies was over 55 years and over 75% of patients were female.

2. Have any other potential equality issues been raised in the overview, specialist adviser questionnaires or patient commentary, and, if so, how has the committee addressed these?

No

3. Have any other potential equality issues been identified by the committee, and, if so, how has the committee addressed these?

No

4. Do the preliminary recommendations make it more difficult in practice for a specific group to access a technology or intervention compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?

No

5. 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?

Not applicable

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 obligation to promote equality?

Not applicable

7. Have the committee's considerations of equality issues been described in the consultation document, and, if so, where?

No

Kevin Harris

Approved by Programme Director and Clinical Advisor

Date: 31/03/2022

Final interventional procedures document

1. Have any additional potential equality issues been raised during the consultation, and, if so, how has the committee addressed these?

No

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 a technology or intervention compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?

The recommendations state:

For people with advanced disease for whom arthrodesis is indicated, this procedure should only be used with special arrangements for clinical governance, consent, and audit or research.

For people who do not have advanced disease and for whom arthrodesis is not indicated, this procedure should only be used in the context of research.

People with advanced disease are more likely to have a substantial adverse impact on normal day to day activities by their condition and therefore classified as disabled. Therefore, the final recommendations make it easier for this population to have access to this intervention without restricting their access to other treatments.

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?
No

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 identified in questions 2 and 3, or otherwise fulfil NICE's obligations to promote equality?
No

5. Have the committee's considerations of equality issues been described in the final interventional procedures document, and, if so, where?
No

Anastasia Chalkidou

Associate Director

Date: 4/04/2022