

# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## Health technologies programme

### Equality impact assessment: Guidance

#### GaitSmart rehabilitation exercise programme for gait and mobility issues

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

#### Draft guidance consultation

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

The committee carefully considered the potential equality issues. GaitSmart is intended to be delivered by a healthcare assistant who would provide patients with a paper copy of the report and demonstrate the exercises. The committee considered that this could reduce the potential equality issues related to digital health technologies. The other equality issues identified in scoping were not specific to GaitSmart and would apply to standard care exercise programmes.

2. Have any other potential equality issues been highlighted in the company's submission, or patient and carer organisation questionnaires, and, if so, how has the committee addressed these?

No other potential equality issues were highlighted.

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

No other potential equality issues were identified.

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

No, the recommendations are not limited to a specific group.

**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?

No

**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 obligations to promote equality?

N/A

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

Patient considerations are outlined in section 4.5 of the draft guidance.

## Medical technology guidance document

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

During consultation, one consultee suggested additional considerations related to the clothing worn by some people from different cultures which could affect attaching the sensors. They also noted accessibility considerations around the technical language and font in the report.

During consultation, the company commented that the suggestion for video representation of exercises in the draft guidance could reduce accessibility because some people may not have access to the necessary technologies. It added that GaitSmart is currently delivered by healthcare assistants who provide a paper copy of the programme and go through the exercises with the patient. This was said to reduce equality issues related to digital ability.

The committee carefully considered these and other equality issues and considerations. It concluded that healthcare professionals should consider each patient's needs and ensure that information is presented clearly and appropriately so that they can understand and be involved in decisions around their care. The committee also considered that patient choice is a significant consideration for using GaitSmart. Treatment options should be discussed with patients before use. Committee considerations around patient selection and choice are outlined in section 4.5 of the guidance.

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

The committee changed the recommendations after consultation to recommend that GaitSmart can be used to treat gait and mobility issues in people at risk of falls while more evidence is generated. This change was intended to reduce barriers to treatment and further evidence generation. The committee considered that GaitSmart could provide another treatment option and may fill a treatment gap. It also noted that there were several ongoing or planned real-world evaluations in the NHS that could address the gaps outlined in the assessment. The committee concluded that there was enough evidence of benefits from using GaitSmart in this group of people for

it to be used while this evidence is generated. There was no change to the recommendations for people having hip or knee replacements.

**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?

The change in the recommendations should increase access to treatment. The clinical experts advised that GaitSmart may not be suitable for some people, such as people with a vestibular problem or complex medical history that needs physiotherapy, or people who are unable to walk 10 strides. GaitSmart may also not be suitable for people with moderate to severe cognitive impairment that affects their ability to follow the programme. The committee considered that GaitSmart is a treatment option. Some people may be more suited or may prefer another intervention. This should be discussed by patients and healthcare professionals before use to select the most appropriate treatment for a person's individual needs and preferences. This is outlined in section 4.5 and 4.6 of the guidance.

**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?

Considerations around patient selection and choice are outlined in sections 4.5 and 4.6 of the guidance.

**5.** Have the committee's considerations of equality issues been described in the medical technology guidance document, and, if so, where?

These are outlined in sections 4.5 and 4.6 of the guidance.

**Approved by Associate Director: Anastasia Chalkidou**

**Date:** 25/3/2024