

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

HEALTH TECHNOLOGY APPRAISAL PROGRAMME

Equality impact assessment – Guidance development

STA Anhydrous sodium thiosulfate for preventing hearing loss caused by cisplatin chemotherapy in people 1 month to 17 years with localised solid tumours

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

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

The company said during scope consultation that anhydrous sodium thiosulfate could significantly improve opportunities and prospects for children receiving cisplatin chemotherapy because it prevents hearing loss related disability.

It also noted that although equipment to manage hearing loss is available on the NHS, higher quality equipment and support services available through private providers are costly, so there is potential inequality in managing hearing loss as patients from lower income backgrounds would not have equal access these services. It said this treatment could positively impact this inequity by preventing hearing loss in the first place.

2. Have any other potential equality issues been raised in the submissions, expert statements or academic report, and, if so, how has the committee addressed these?

The National Deaf children's Society and RNID submissions report that there is evidence to suggest that deaf children from ethnic minorities have poorer educational outcomes compared with children with no hearing loss, and that

black and Asian deaf children have lower attainment scores compared to other ethnic groups or to white deaf children, respectively.

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

None identified

4. Do the 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?

The recommendations do not distinguish between subgroups within the indicated population so will not affect access.

5. Is there potential for the recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?

The population with hearing loss is considered as a whole and therefore no discrimination based on disability will occur.

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?

No

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

The committee concluded that the availability of anhydrous sodium thiosulfate to prevent cisplatin-related hearing loss could reduce health inequalities. This is explained in the equality section (section 3.22) of the draft guidance.

Approved by Associate Director (name): ...Richard Diaz.....

Date: 13 Dec 2024