

**NATIONAL INSTITUTE FOR HEALTH AND CARE  
EXCELLENCE**

**NICE guidelines**

**Equality and health inequalities assessment (EHIA)  
template**

**Jaundice in newborn babies under 28 days  
(NICE guideline CG98)**

The considerations and potential impact on equality and health inequalities have been considered throughout the guidance development, maintenance and update process according to the principles of the NICE equality policy and those outlined in [Developing NICE guidelines: the manual](#).

This EHIA relates to:

Diagnostic accuracies of methods related to identification of hyperbilirubinaemia

## Appendix B: equality and health inequalities assessment (EHIA)

### 2023 exceptional surveillance of jaundice in newborn babies under 28 days (NICE guideline CG98)

#### STAGE 1. Surveillance review

Date of surveillance review: October 2023

Focus of surveillance review: Identification of jaundice in newborn babies

Exceptional review

1.1 On reviewing the existing EIA or EHIA and issues log for the guideline(s), describe below any equality and health inequalities issues relevant to the current surveillance review

The [Equality Impact Assessment](#) carried out during guideline development in 2010 considered the issues of ethnicity in identification of jaundice. The development group noted that it is difficult to recognise jaundice in babies with darker skin tones. The group noted that this difficulty can be alleviated by careful examination of sclera, gums and blanched skin. It was also concluded that parents and relatives can play a significant role in identifying jaundice in the baby.

The GDG group recommended additional tests to determine the cause of jaundice in babies particularly from populations of African, Asian and Mediterranean origin. The evidence supported that haemolysis due to blood group incompatibility and G6PD deficiency might be probable cause of pathological jaundice in certain ethnic groups.

In 2016, [Equality Impact Assessment](#) did not identify potential equality issues during the update of the guideline.

1.2 Did you identify any equality and health inequalities issues through initial intelligence gathering (for example, national policy documents, topic expert/patient group feedback, evidence searches, implementation data)?

- 1) *Protected characteristics outlined in the Equality Act 2010 (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation)*
- 2) *Socioeconomic deprivation (for example, variation by area deprivation such as Index of Multiple Deprivation, National Statistics Socio-economic Classification, employment status, income)*
- 3) *Geographical area variation (for example, geographical differences in epidemiology or service provision- urban/rural, coastal, north/south)*
- 4) *Inclusion health and vulnerable groups (for example, vulnerable migrants, people experiencing homelessness, people in contact with the criminal justice system, sex workers, Gypsy, Roma and Traveller communities, young people leaving care and victims of trafficking)]*

The Health Safety Investigation Board published a [report](#) on an incident of delayed jaundice diagnosis in a baby with dark skin tone. The HSIB report made a recommendation for NICE to assess the evidence on identification of jaundice particularly in babies with black and brown skin tone and risk factors of jaundice especially prematurity. In July 2023, [NHS Race and Health Observatory Review of neonatal assessment](#) reported that darker skin tone babies seem to be at disadvantage due to practice based on White European babies. Existing NICE guidelines (CG98) on jaundice in newborn babies do not make any specific recommendations for identification of jaundice in darker skin tones. This population is identified as a group who may have difficulty in diagnosis of jaundice and could lead to serious harm and safety issues. Therefore, this surveillance review gathers evidence to bridge the gap in NICE guidelines on identification of jaundice in newborns with darker skin tones versus lighter skin tones.

1.3 If you have consulted stakeholders or topic experts, what questions did you ask about equality and health inequalities issues?

In consultation, it has been proposed that an amendment will be made to include in recommendation 1.2.5 that it is difficult to detect jaundice visually in neonates with darker skin tones. The rest of the guideline will not be updated. Consultation will be focused on agreement or disagreement about proposed decision. A further question about health inequalities issues will be included focusing on any additional health inequalities if noted.

The majority of stakeholders agreed with the proposed changes to recommendation 1.2.5 during consultation. Stakeholders also commented on health inequalities issues, they highlighted the NHS Race Health observatory report, where it identified that Black, Asian and minority ethnic parents can experience difficulties in accessing or receiving care for

themselves or their babies. The NHS Race Health observatory report is already summarised and highlighted in this surveillance review.

1.4 What equality and health inequalities issues have been identified during this surveillance review and what was the impact on the current review and outcome decision?

This surveillance review addresses one of the major health inequality issues that darker skin tone may seem to be at disadvantage for early screening or assessment for neonatal jaundice. It has been proposed in the surveillance review that an amendment will be made in the recommendation 1.2.5 that jaundice may be difficult to detect in newborns with darker skin tones.

In addition to this, during public consultation, stakeholders also highlighted that Black, Asian and minority ethnic parents can experience difficulties in accessing or receiving care for themselves or their babies. Access and service delivery issues are outside the scope of this guideline.

Completed by surveillance reviewer: \_\_\_\_\_TT \_\_\_Senior Technical Adviser\_\_\_\_\_

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Approved by NICE surveillance associate director: \_\_KN\_\_\_\_\_

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