

# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## DIAGNOSTICS ASSESSMENT PROGRAMME

### Equality impact assessment – Guidance development

#### Multiple frequency bioimpedance devices to guide fluid management in people with chronic kidney disease having dialysis

#### Consultation

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

During scoping it was identified that the incidence of chronic kidney disease and the need for dialysis increases with age. Also, the incidence of chronic kidney disease is higher in people of south Asian family origin (from India, Bangladesh, Sri Lanka and Pakistan) and people of African or Caribbean family origin. Some people with chronic kidney disease may be protected under the disability provision of the Equality Act 2010. These potential equalities issues are functions of the condition rather than of the use of the technology.

During scoping it was identified that normal ranges of lean or adipose tissue body composition may differ between ethnicities which may impact on the interpretation of test results in practice, particularly where the tissue and fluid models used in the devices have been validated in non-representative populations. In addition, the accuracy of calculated fluid overload and target weight may be affected when measurements are made on people with amputations, people for whom recommended electrode configurations cannot be used and people who are unable to assume recommended positioning for measurements to be made.

The external assessment group were unable to perform any subgroup analyses for these groups as relevant data were not identified in the clinical effectiveness review. In addition the committee noted the lack of published validation studies for the use of multiple frequency bioimpedance devices in these groups. The committee considered this potential equality issue and highlighted the importance of validating the accuracy of all multiple frequency devices for people with amputations, people for whom recommended electrode configurations cannot be used, people who are unable to assume recommended positioning for measurements to be made, people with extremes of body composition and across different ethnicities (section 5.20 of the diagnostics consultation document).

2. Have any other potential equality issues been raised in the diagnostics assessment report, and, if so, how has the Committee addressed these?

No other potential equality issues were raised in the diagnostics assessment report.

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 by the committee.

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.

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?

Not applicable.

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

Yes – in section 5.20.

**Approved by Programme Director (name):** Mirella Marlow

**Date:** 6 February 2017

### **Diagnostics guidance document**

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

No additional potential equality issues were raised during consultation.

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, or difficulties with, access for the specific group?

The recommendations did not change after consultation.

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 recommendations did not change after consultation.

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?

The recommendations did not change after consultation.

5. Have the Committee's considerations of equality issues been described in the diagnostics guidance document, and, if so, where?

Yes – in section 5.20.

**Approved by Programme Director (name):** Mirella Marlow

**Date:** 12 April 2017