

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

DIAGNOSTICS ASSESSMENT PROGRAMME

Equality impact assessment – Scoping Innovative tests for diagnosing urinary tract infections

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

1. Have any potential equality issues been identified during the scoping process (scoping workshop discussion, assessment subgroup discussion), and, if so, what are they?

Potential equality issues were discussed both in the scoping workshop and in the assessment subgroup meeting on 28 November 2022.

The following were identified as potential equality issues relating to the condition:

- Women, pregnant women, older people, and people who are catheterised are more likely to develop a UTI. In adults, people with neurogenic bladder, diabetes, polycystic kidney disease or people who are immunocompromised have a higher risk of complicated UTIs. Comorbidities such as neurogenic bladder, diabetes, and multiple sclerosis are also related to an increased risk of catheter associated UTI. Sex, pregnancy, age and disability are protected characteristics under the Equality Act (2010).

The following were identified as potential equality issues relating to the tests:

- Dipstick tests that can be used to rule out UTIs are not recommended for men, adults older than 65 and adults who are catheterised. Tests that can more accurately rule out a UTI diagnosis for these groups could have a particular benefit in

reducing unnecessary use of antibiotics and side effects resulting from these.

- Autistic people, people with neurological disorders (for example dementia) and people who are frail may present with atypical symptoms or struggle to communicate their symptoms with healthcare professionals. Tests that can more accurately assess for UTIs may particularly benefit these groups.
- People from minority ethnic family backgrounds may experience cultural barriers that may stop them accessing healthcare for UTIs. Non-English speakers may also have trouble communicating their symptoms which may lead to delays in diagnosis and receiving effective treatment. Tests that can more accurately assess for UTIs may particularly benefit these groups.
- Tests that are more accurate may reduce the need for people to provide repeat urine samples, which may benefit groups who find this difficult, such as people who are pregnant, older people, people who are incontinent or people with dementia. Any reduction in the need to travel to see a doctor, drop off samples and pick up prescriptions may benefit people with a lower socioeconomic status or people with a disability.

2. What is the preliminary view as to what extent these potential equality issues need addressing by the Committee?

The potential equality issues will be considered by committee during decision making about each technology. Further subgroups have been added to the scope population to reflect identified equalities issues, to help committee consider the impact of the assessing technologies on these groups (data permitting).

3. Has any change to the draft scope been agreed to highlight potential equality issues?

Following the scoping workshop and ASG meeting, the following changes were made to the scope to highlight potential equality issues:

- Detail was added to section 7 of the scope to include groups that are at higher risk of complicated UTIs (for example people neurogenic bladder, diabetes, polycystic kidney disease or people who are immunocompromised).
- Detail was added to section 7 to explain that autistic people or people with neurological or neurodevelopmental disorders may present with atypical symptoms or struggle to effectively communicate their symptoms when presenting with a suspected UTI.
- Detail was added to section 7 to explain the people with and ethnic minority family background may face cultural barriers when accessing services to diagnose and treat UTIs. Information about non-English speakers and potential communication barriers when explaining their symptoms was also added to section 7.

Further subgroups have been added to the scope population to reflect identified equalities issues.

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

No.

Approved by Associate Director (name): Rebecca Albrow

Date: 02/12/2022