

# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## NICE guidelines

### Equality impact assessment

#### **Type 1 diabetes in children and young people: diagnosis and management [NG18]**

The impact on equality has been assessed during guidance development according to the principles of the NICE equality policy.

#### **3.0 Guideline development: before consultation (to be completed by the Developer before consultation on the draft guideline)**

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

Not applicable

3.2 Have any **other** potential equality issues (in addition to those identified during the scoping process) been identified, and, if so, how has the Committee addressed them?

The committee identified the following potential equality issues:

- lower socio-economic groups
- children and young people from black, Asian and minority ethnic minority groups
- children and young people with physical or learning disabilities or language barriers

The committee highlighted that from their clinical experience children and young people from lower socioeconomic groups or from black, Asian and minority ethnic minority groups were less likely to be prescribed continuous glucose monitoring devices. These groups were often perceived to be less likely to cope with or manage

these devices. These findings were also reported in the National Paediatric Diabetes Audit.

Extending the recommendation to offer real-time continuous glucose monitoring (rtCGM) or intermittently scanned continuous glucose monitoring (isCGM) to all children and young people with type 1 diabetes will help remove this observed discrepancy in clinical practice and address this inequality in access.

The committee identified that children and young people using CGM with language difficulties or physical or learning disabilities would benefit from support from their diabetes care team. The committee also highlighted that extra effort should be made to ensure that training is accessible to families where English is not their first language by use of interpreters and providing information in different languages.

Children and young people from lower socio-economic groups may experience difficulties in using CGM if their device requires access to particular higher cost technologies (such as a smartphone, computer for sharing readings with their health care professional and up to date phone software). In response to this, the committee added this as a factor to consider when choosing a continuous glucose monitoring device (outlined in box 1 in the guideline). These factors can be considered as part of a discussion based on their individual preferences, needs, characteristics, and the functionality of the devices available.

3.3 Have the Committee's considerations of equality issues been described in the guideline for consultation, and, if so, where?

Yes – in the “other factors the committee took into account” section of the committee's discussion of the evidence.

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

The updated recommendation are likely to result in children and young people with type 1 diabetes having broader access to rtCGM or isCGM. This should reduce inequalities and enable children and young people to self-manage their diabetes.

3.5 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.

3.6 Are there any recommendations or explanations that the Committee could make to remove or alleviate barriers to, or difficulties with, access to services identified in box 3.4, or otherwise fulfil NICE's obligation to advance equality?

The committee considered advancing equality in all updated recommendations. The updated recommendations should reduce inequalities and enable more children and young people to receive a CGM intervention. Certain groups such as children with physical and learning disabilities, lower socio-economic groups and children and young people from black, Asian and minority ethnic minority were identified. Committee discussions around equality issues have been added to the evidence review.

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Date: 1.10.21

Approved by NICE quality assurance lead: Christine Carson, Programme Director

Date: 03.11.21