

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE guidelines

Equality impact assessment

Chronic kidney disease: assessment and management (update)

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?

Potential issues raised during scoping were added to review protocols where these were appropriate.

The committee membership included a consultant in care of the elderly to reflect concerns about the management of CKD in older people.

One of the questions from the scope specifically addressed the biological variability associated with measuring CKD in people from BAME family backgrounds.

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 additionally identified that frailty, multimorbidity and polypharmacy were important factors in the management of chronic kidney disease and noted that this might be especially true for some older people.

The committee also discussed whether differences in eGFR values that have previously been attributed to people of black African or Caribbean background are related to family background or whether they are related to muscle mass and have proposed further research to establish this.

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?

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

The committee considerations of equality issues are described in the rationale and impact section of the guideline and in the committee discussion of the evidence sections of the evidence reviews.

Cross references to other NICE guidelines for frail people with multiple health problems are contained in the body of the recommendations, for example, section 1.6 of the guideline contains the text "See [NICE's guideline on hypertension](#) in adults for advice on blood pressure control in people with frailty and multimorbidity."

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?

No, the recommendations should improve access for all groups and should increase clinicians awareness of the needs of people who may be frail or have co-existing health conditions.

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, people with disabilities should be able to access all nephrology services in line with legal requirements about accessible services. Nothing in the recommendations has the potential to have an impact on that.

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 questions 3.1, 3.2 or 3.3, or otherwise fulfil NICE's obligation to advance equality?

Not applicable. No barriers were identified.

Completed by Developer: Chris Carmona

Date: 9th November 2020

Approved by NICE quality assurance lead: Kay Nolan

Date: 18th January 2021