

## 1.0.7 DOC EIA

# NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

## NICE guidelines

### Equality impact assessment

## RENAL AND URETERIC STONES

**1.0 Checking for updates and scope: before scope consultation (to be completed by the Developer and submitted with the draft scope for consultation)**

1.1 Have any potential equality issues been identified during the check for an update or during development of the draft scope, and, if so, what are they?

Extra Corporeal shock wave lithotripsy (ESWL) equipment is limited to major urology centres, requiring patients from other locations to travel. Smaller units may have access to hired mobile units resulting in increased waiting times for patients in these locations.

Risks to women of childbearing age related to doses of radiation exposure during imaging techniques.

1.2 What is the preliminary view on the extent to which these potential equality issues need addressing by the Committee? For example, if population groups, treatments or settings are excluded from the scope, are these exclusions justified – that is, are the reasons legitimate and the exclusion proportionate?

The clinical and cost effectiveness of ESWL is included in the scope.  
The evidence for imaging in women of child bearing age will be considered separately to the general population.

Completed by Developer Gill Ritchie

Date 12 January 2017

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Approved by NICE quality assurance lead \_\_Christine Carson\_\_\_\_\_

Date \_\_19 January 2017\_\_\_\_\_

### **2.0 Checking for updates and scope: after consultation (to be completed by the Developer and submitted with the revised scope)**

2.1 Have any potential equality issues been identified during consultation, and, if so, what are they?

The potential equality issues identified before consultation included:

1. Extra Corporeal shock wave lithotripsy (SWL) equipment is limited to major urology centres, requiring patients from other locations to travel. Smaller units may have access to hired mobile units resulting in increased waiting times for patients in these locations.
2. Risks to women of childbearing age related to doses of radiation exposure during imaging techniques.

An additional equality issue identified during consultation includes consideration for the following:

1. People who are HIV positive and who are being treated with protease inhibitors have a higher risk of developing renal stones.

2.2 Have any changes to the scope been made as a result of consultation to highlight potential equality issues?

In light of the additional potential equality issue being identified, the scope has been edited to include the subgroup of people who are HIV positive and being treated with protease inhibitors, as they may have a higher risk of development renal stones.

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2.3 Is the primary focus of the guideline a population with a specific disability-related communication need?

If so, do the key messages for the public need to be produced in an alternative version?

If so, which alternative version is recommended?

The alternative versions available are:

- large font or audio versions for a population with sight loss
- British Sign Language videos for a population deaf from birth
- 'Easy read' versions for people with learning disabilities or cognitive impairment.

Does an alternative version(s) of the consultation documents also need to be produced?

The primary focus of the guideline is not a population with specific disability-related communication needs.

Updated by Developer

Gill Ritchie, Guideline lead

Date:

06 March 2017

Approved by NICE quality assurance lead: Sharon Summers-Ma

Date

13 March 2017

### **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?

**The availability of Shock wave lithotripsy (SWL) was considered by the committee when making recommendations for this treatment. For ureteric stones in particular prompt treatment is required because of the risk of blockage caused by stones or kidney damage, and therefore an alternative**

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

**treatment option is recommended if SWL equipment is not available and would result in an unacceptable delay to treatment.**

**Low-dose CT imaging has been recommended for adults. The committee discussed how there may be some groups such as women of child bearing age where radiation risk is a concern, and if it was thought a woman might be pregnant ultrasound is generally the preferred option.**

**People who are HIV positive and being treated with protease inhibitors was added as a subgroup following the scope consultation because of their increased risk of developing renal stones. The committee's view was that this had been raised in relation to the use of calcium channel blockers in this population and not to other areas of the guideline. This subgroup was included in the protocol for medical expulsive therapy but no data for this population was found.**

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?

**Radiation exposure in children and young people through the use of CT scanning was raised by committee members, particularly a concern about an increased risk of cancer over their lifetime. They agreed that ultrasound should be recommended as first-line imaging, and that low-dose non-contrast CT should only be considered if there was still uncertainty about the diagnosis of renal colic after ultrasound.**

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

**The availability of Shock wave lithotripsy (SWL) was considered by the committee and this discussion is described in the 'Committee's discussion of the evidence' section of the guideline.**

**Risks associated with radiation exposure in the use of CT imaging are**

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

**discussed in the 'Committee's discussion of the evidence' section of the guideline.**

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**

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?

Recommendations for SWL in areas where lithotripters are not available may require people to travel for treatment which may impact on people with disabilities.

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?

**no**

**no**

Completed by Developer \_\_\_\_\_ Gill Ritchie

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Date 31/5/18

Approved by NICE quality assurance lead Simon Ellis

Date 21/06/2018

### 4.0 Final guideline (to be completed by the Developer before GE consideration of final guideline)

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

**No additional potential equality issues have been raised during consultation. .**

4.2 If the recommendations have changed after consultation, are there any recommendations that make it more difficult in practice for a specific group to access services compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?

**There are no edited recommendations that present barriers to or difficulties with access to services for any specific group.**

4.3 If the recommendations have changed after consultation, is there potential for the recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?

**There are no edited recommendations that can have an adverse impact on people with disabilities.**

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4.4 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 to services identified in questions 4.1, 4.2 and 4.3, or otherwise fulfil NICE's obligations to advance equality?

**No.**

4.5 Have the Committee's considerations of equality issues been described in the final guideline, and, if so, where?

1. The availability of Shock wave lithotripsy (SWL) was considered by the committee and this discussion is described in the committee's discussion of evidence sections in the Surgical interventions, and the Stents before surgery chapters.

2. Risks to women of childbearing age related to doses of radiation exposure during CT imaging are described in the committee's discussion of the evidence section in the Imaging for diagnosis chapter.

The equality issue identified during the scope consultation regarding people who are HIV positive and having treatment with protease inhibitors being at higher risk of renal stones was felt by the committee to be no longer relevant because treatments for HIV have changed and .treatment for renal stones would be no different to that of the general population.

Updated by Developer : Gill Ritchie

Date: 11/10/18

Approved by NICE quality assurance lead Simon Ellis

Date 29/10/2018