Aneurin Bevan Health Board

National Institute for Health and Clinical Excellence (NICE) Guidance Implementation Policy

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1 Executive Summary

Aneurin Bevan Health Board is committed to providing patients with effective treatment and care and in doing so must be able to demonstrate that it:

- conforms to the National Institute for Health and Clinical Excellence (NICE) technology appraisals
- takes account of NICE clinical guidelines, and
- follows interventional procedure guidance

The National Institute for Health and Clinical Excellence (NICE) was established in April 1999 as an Independent Special Health Authority sponsored by the Welsh Government and Department of Health. Its role is to appraise the clinical benefits and cost effectiveness of health care interventions notified to it by the Secretary of State for Health and the Welsh Government. Its purpose is to ensure everyone has equal access to medical treatments and high quality care from the NHS - regardless of where they live in England and Wales.

NICE guidance is based on the best available evidence and is designed to help healthcare professionals in their work. The guidance does not replace knowledge and skills, but are to be used by healthcare professionals, patients and their carers to help them make decisions about treatment and healthcare that is best for the individual patient.

Following the DoH arms length review in 2004 and the reforming of NICE in 2005 England and Wales now have different relationships with NICE.\(^1\) In Wales there is a Service Level Agreement covering the use of:

- **Technology appraisals** (TA) - guidance on the use of new and existing medicines and treatments within the NHS in England and Wales.
  
  [http://guidance.nice.org.uk/Type/TA/Published](http://guidance.nice.org.uk/Type/TA/Published)

- **Clinical guidelines** (CG) - guidance on the appropriate treatment and care of people with specific diseases and conditions within the NHS in England and Wales, and also cancer guidelines.
  
  [http://guidance.nice.org.uk/Type/CG/Published](http://guidance.nice.org.uk/Type/CG/Published)

• **Interventional procedures (IPG)** - guidance on whether interventional procedures used for diagnosis or treatment are safe enough and work well enough for routine use in England, Wales and Scotland. [http://guidance.nice.org.uk/Type/IP/Published](http://guidance.nice.org.uk/Type/IP/Published)

There is an expectation that NHS bodies in Wales will take full account of the “recommendations” made by NICE when commissioning and delivering services to patients.

NICE currently produce the following data sets which are not part of the Welsh SLA. Nevertheless these should be considered good practice and taken account of when delivering services to patients.

- 2005: Public Health Guidance [http://guidance.nice.org.uk/Type/PHG/Published](http://guidance.nice.org.uk/Type/PHG/Published)
- 2006: Cancer Service Guidelines [http://guidance.nice.org.uk/Type/CSG/Published](http://guidance.nice.org.uk/Type/CSG/Published)
- 2010: Medical Technology Guidelines [http://guidance.nice.org.uk/Type/MT/Published](http://guidance.nice.org.uk/Type/MT/Published)
- 2011: Diagnostics Guidance [http://guidance.nice.org.uk/Type/DT/Published](http://guidance.nice.org.uk/Type/DT/Published)

**1.1 Scope of Policy**

As NICE guidance is based on the best available evidence all Health Care Professionals have a professional duty to be aware of and to take full account of all NICE guidance applicable to the service they provide.²

Where NICE guidance is not routinely followed this must be documented using the standards for health services reporting template for standard 7 and submitted to the Clinical Effectiveness & Consent Group with reasons why the guidance is not being followed so that it may be recorded and reported accordingly.

² [http://www.gmc-uk.org/guidance/ethical_guidance/prescriptions_faqs.asp#3](http://www.gmc-uk.org/guidance/ethical_guidance/prescriptions_faqs.asp#3)
1.2 Standards for Health Services

This policy relates to and supports the implementation of Standard for Health Services 7: Safe and Clinically Effective Care:

Organisations and Services will ensure that patients and service users are provided with safe, effective treatment and care based on agreed best practice and guidelines including those defined by NICE).

2 Aims

The policy aims to provide a strategic approach to the implementation of NICE Guidance within the Health Board that will ensure consistency and provide a framework for distribution and monitoring of the status of guidance across the organisation.

3 Categories of Guidance

The following categories of guidance are referred to collectively as NICE guidance:

3.1 Technology Appraisals

Technology appraisals are recommendations on the use of new and existing medicines and treatments within the NHS in England and Wales, such as:

- medicines
- medical devices
- diagnostic techniques
- surgical procedures
- health promotion activities

There is a statutory responsibility on Health Boards to make funding available to enable the implementation of NICE technology appraisal guidance within three months of publication (WHC (2003)109). No additional funding for implementation of NICE guidance is made available from the Welsh Government.

Since the 1st April 2009 Local Health Boards have had the same three month legal requirement to implement recommendations
of the All Wales Medicines Strategy Group (AWMSG) (ML (EH/ML009/09))

NB: AWMSG will take into account the NICE future work programme, including the Single Track Assessment (STA) process, when considering whether a product will be appraised. AWMSG will not normally consider appraising a product if NICE intend to publish their final appraisal of the same product within a 12 month period from receipt of Form B. **AWMSG guidance is interim to NICE guidance should this be subsequently published.**

NICE funding has been distributed to Divisions based on historical spend therefore the cost pressure of any new guidance needs to be absorbed by achieving savings elsewhere.

### 3.2 Clinical Guidelines

Clinical Guidelines are recommendations on the appropriate treatment and care of people with specific diseases and conditions within the NHS in England and Wales. They are based on the best available evidence and help healthcare professionals in their work. They do not replace the knowledge and skills and professional judgement of healthcare professionals although where guidance is not followed the health professional should be able to provide clear reasons why.

There is no statutory obligation to fund the advice provided in NICE Clinical Guidelines, however there is an expectation that NHS bodies in Wales will take full account of the "recommendations" made by NICE when commissioning and delivering services to patients.

Clinical Guidelines can be described as simple – relating to a single speciality or complex⁴ (Appendix 1) relating to a number of specialties.

### 3.3 Interventional Procedures

WHC(2003)58 states that since Feb 2003 clinicians undertaking new interventional procedures should notify NICE’s

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⁴ See responsibilities NICE and Consent Implementation Group 4.5
Interventional Procedure Programme (IPAC) via the NICE website (www.nice.org.uk) and should do so under their Health Board’s Quality & Patient Safety regime. (Please see WHC for more detailed information). Any new interventional procedure undertaken within the Health Board should be notified to the Assistant Director for Quality & Standards who will take the necessary action on the clinician’s behalf.

NICE interventional procedures guidance covers:

- the safety of the procedure
- whether it works well enough for routine use
- whether special arrangements are needed for patient consent
- There is no obligation to fund or Introduce Interventional Procedures Guidance

4 Responsibilities and Implementation Procedure

Implementation of NICE guidance is subject to the financial frameworks set out by Welsh Government and contained within existing budgets.

4.1 Medical Director

The Medical Director carries overall responsibility for the implementation of NICE guidance within the Health Board.

4.2 Assistant Director Quality and Standards

Responsibility for implementation of the NICE guidance lies within clinical divisions in liaison with the Consent and NICE implementation Group and the Assistant Medical Director for Quality and Standards.

The Assistant Medical Director for Quality and Standards determines the initial scope of guidance received and identifies professionals who are required to designate implementation leads.

4.3 Quality and Patient Safety Team

Designated staff within the Quality and Patient Safety Team have responsibility for:

- the distribution of NICE guidance via a dedicated email NICEguidance.ABB@wales.nhs.uk to individuals identified by the Assistant Director Quality and Standards
• the development and maintenance of an electronic library of all NICE documents
• collection and recording of compliance data
• servicing the NICE and Consent Implementation Group

4.4 Medicines and Therapeutics Committee

The ABHB Medicines and Therapeutics Committee (MTC) determines the implications for the ABHB Joint Medicines Formulary of NICE CGs and TAs (as well as national guidance from AWMSG) taking into consideration the financial impact and service arrangements. The MTC seeks clarification on NICE guidance where necessary and may recommend adaptations to CGs on the basis of financial / service considerations or where medicines are recommended as ‘options’.

The MTC also provides guidance on where medicines recommended by NICE are most appropriately initiated / repeat prescribed as well as monitoring the use of medicines not recommended by NICE (and AWMSG). The MTC will also resolve any variation between existing Formulary choices and subsequent NICE recommendations.

4.5 NICE and Consent Implementation Group

The NICE and Consent Implementation Group are responsible for:

• setting the policy and overseeing the implementation of NICE guidance
• Identifying complex guidance (Appendix 1) and establishing task and finish groups to ensure full consideration and implementation
• providing support as required
• reporting progress to the Clinical Standards and Effectiveness Group and Quality and Patient Safety Committee as required

4.6 Divisional and Locality Management Teams

The Divisional and Locality Directors supported by the Divisional/Locality Lead Nurses and General Managers are responsible for ensuring:

• their division/locality is represented at the NICE and Consent Implementation Group
• any NICE guidance relevant to the directorates, teams and services and Independent Contractors within their division/locality are distributed for implementation.
• Implementation of NICE guidance is monitored within the locality/division as applicable
• NICE guidance not followed is reported via the standards for health services reporting template (appendix 2)

4.7 Clinical Directors

Clinical Directors are responsible for ensuring:

• any NICE guidance relevant to the teams and services within their directorate are distributed for implementation
• applicable NICE guidance is monitored
• NICE guidance not routinely followed is reported to the Divisional Director via the standards for health services reporting template (appendix 2)

4.8 All Healthcare Professionals

All Health Care Professionals have a duty to be aware of and to take full account of all NICE Guidance applicable to the service they provide.

5 Audit

Clinical audit is an integral component of ensuring reliable implementation of NICE guidance across Divisions and Localities. Divisions and Localities will be responsible for incorporating audit of NICE guidance into their Divisional/Locality/Directorate Continuous Improvement/Audit Programmes and performance reviews.

6 References

• NICE website – www.nice.org.uk
7 Appendices

7.1 Appendix 1 – Flowchart Complex NICE Guidance

7.2 Appendix 2 – Standards for Health Services Reporting Template
Appendix 1 – Management of Complex NICE Guidance

1. Guidance Received From NICE

2. Guidance logged on Health Board database

3. Assistant Director Quality and Standards to assign Clinical Lead

4. Quality and Patient Safety team to contact Clinical Lead to establish if guidance is simple (one speciality) or Complex (more than one speciality)

SIMPLE

- Assign Lead to implement locally

COMPLEX

- Designated Clinical Lead and NICE and Consent Implementation Group to identify range of specialities involved

- Clinical Lead to establish a Task & Finish group – consisting of all specialities involved

- Task & Finish group to agree and assign roles and responsibilities to members to ensure full implementation of guidance and collaboration between teams and services

- Task & Finish group reports to Consent & Clinical Effectiveness Group, which reports to Clinical Standards & Effectiveness Group which reports to QPSC

- Task & Finish group ends when guidance is fully implemented or discrepancies (can’t do’s) are logged and agreed at QPSC level
## Appendix 2 – Standards for Health Services reporting Template

<table>
<thead>
<tr>
<th>Standards for Health Services: Reporting Template</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Division:</td>
</tr>
<tr>
<td>Date of Submission:</td>
</tr>
<tr>
<td>Completed By:</td>
</tr>
<tr>
<td><strong>Standard 7: Safe and Clinically Effective Care</strong></td>
</tr>
<tr>
<td>Supporting Committee: <strong>Nice and Consent Implementation Group</strong></td>
</tr>
<tr>
<td>Organisations and services will ensure that patients and service users are provided with safe, effective treatment and care:</td>
</tr>
<tr>
<td>a) based on agreed best practice and guidelines including those defined by National Service Frameworks, National Institute for Health and Clinical Excellence (NICE), National Patient Safety Agency (NPSA) and professional bodies;</td>
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<tr>
<td>b) that complies with safety and clinical directives in a timely way; and</td>
</tr>
<tr>
<td>c) which is demonstrated by procedures for recording and auditing compliance with and variance from any of the above.</td>
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</tbody>
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### Specific Questions Set by Supporting Committee

<table>
<thead>
<tr>
<th>Routine Requirements</th>
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</thead>
<tbody>
<tr>
<td>1: How do you know routinely about NICE guidance and alerts, and assess whether they are relevant to you?</td>
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<tr>
<td>Improvements made this reporting period:</td>
</tr>
<tr>
<td>2: How do you act on guidance or alerts?</td>
</tr>
<tr>
<td>3: How do you know that action has been taken in relation to NICE Guidance and Alerts and where is this monitored and recorded?</td>
</tr>
<tr>
<td>Issues/Risks to be escalated - support/advice of overseeing committee required:</td>
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</tbody>
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