

Leeds Health & Wellbeing Board

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Report of: Dr Stephen Stericker, Implementation Consultant, National Institute for Health and Care Excellence.

Report to: Leeds Health and Wellbeing Board

Date: 29th January 2014

Subject: Health and social care guidance and quality standards, National Institute for Health and Care Excellence.

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| Are there implications for equality and diversity and cohesion and integration? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is the decision eligible for Call-In? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number: | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

Summary of main issues:

To discuss

1. The extended role of NICE in producing evidence based guidance and quality standards across health, public health and social care
2. The relevance of NICE guidance and quality standards to the local Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy.
3. An overview of the practical resources available in support of using NICE guidance and quality standards
4. How Leeds Health and Wellbeing Board and its members can inform and influence the work of NICE

Recommendations

The Health and Wellbeing Board is asked to consider:

- How the Board and partners might work with NICE guidance, quality standards and implementation support resources to ensure that strategic priorities continue to be informed by:
 - the best available evidence on improving health and wellbeing outcomes for the people of Leeds
 - The best available evidence on what represents value for money.

1. Purpose of this report

- 1.1 To raise awareness of the role of NICE in producing evidence based guidance and quality standards for health, public health and social care.
- 1.2 To promote the benefits for the Health and Wellbeing Board in using NICE guidance and quality standards.
- 1.3 To discuss how the members of the Leeds Health and Wellbeing Board can work with NICE to influence the development of guidance and implementation support resources, ensuring that they are fit for purpose.

2 Background information

- 2.1 The role of NICE is to:
 - identify good practice using the best available research and other evidence
 - help to resolve uncertainty for the public, patients and professionals about the nature and standard of care that can be expected.
 - reduce variation in the availability and quality of practice and care
 - help to resolve uncertainty about what represents value for money
- 2.2 The Health and Social Care Act (2012) transferred public health responsibilities to local government, and gave NICE new responsibilities to produce guidance and related quality standards for social care. In April 2012, NICE changed its name to the National Institute for **Care** Excellence to reflect the changing responsibilities.
- 2.3 As a result of these changes, the role of NICE is now relevant to those working in local government, including officers, councillors, members of a Health and Wellbeing Board and Healthwatch.
- 2.4 Local authorities are important stakeholders for NICE and as such they are looking at how they can develop close working relationships with one another to help understand how they are using NICE guidance and resources, and how they might influence their development.
- 2.5 Their Field Team of Implementation Consultants covers geographical regions across England. As the regional Implementation Consultant for Yorkshire the Humber and the North East. There are many aspirations to raise awareness of the benefits of using NICE guidance and quality standards and to explore any opportunities to support the work of the Board in achieving the priorities contained within the Leeds Joint Health and Wellbeing Strategy 2013-2015

3 Main issues

- 3.1 NICE produces a range of guidance that makes evidence-based recommendations on best practice for new and existing medicines, medical technologies, healthcare, public health and social care.
- 3.2 Much of the guidance is relevant to the priorities contained within the Leeds Joint Health and Wellbeing Strategy 2013-2015. For example, the November 2013 bi-

monthly report; focus upon outcome 3 of the strategy, reports on progress with Priority 7, Improve people's mental health and wellbeing (p2), states the following:

“Across Leeds, we have a broad range of programmes in place, covering the mental health and wellbeing of both children, young people and adults, reflecting national priorities within ‘No Health without Mental Health’. (p2).

3.3 The following links represent only some of the relevant NICE guidance that makes recommendations in relation to both population based interventions as well as more specific interventions for people in need of care and support. The guidance may focus upon a particular topic (such as depression), a particular population (such as schoolchildren) or a particular setting (such as the workplace).

- **Mental wellbeing in older people** (<http://guidance.nice.org.uk/PH16>)
- **Promoting mental wellbeing at work** (<http://guidance.nice.org.uk/PH22>)
- **Social and emotional wellbeing – early years** (<http://guidance.nice.org.uk/PH40>)
- **Social and emotional wellbeing in secondary education** (<http://www.nice.org.uk/PH20>)
- **Psychosis and schizophrenia in children and young people** (<http://guidance.nice.org.uk/CG155>)
- **Conduct disorders in children and young people** (<http://guidance.nice.org.uk/CG158>)
- **Social Anxiety Disorder** (<http://publications.nice.org.uk/social-anxiety-disorder-recognition-assessment-and-treatment-cg159>)
- **Service user experience in adult mental health services** (<http://publications.nice.org.uk/service-user-experience-in-adult-mental-health-improving-the-experience-of-care-for-people-using-cg136>)

3.4 NICE quality standards are a concise set of prioritised evidence based statements, underpinned by guidance, that identify best practice interventions or areas of care that are expected to have the greatest impact upon the quality of care and health and wellbeing outcomes. Information on people's experience of using services, safety issues, equality and cost impact are also considered during the development process.

3.5 For example, the Supporting People to Live Well with Dementia Quality Standard consists of 10 prioritised statements that cover the care and support of people with dementia. It applies to all social care settings and services working with and caring for people with dementia. The quality statements make recommendations about the measures that might be used to evidence improvement in the quality and outcomes of care.

3.6 A range of practical resources to support the use and implementation of the range of guidance and quality standards are also published and examples include:

- a tool to calculate the return on investment from implementing a range of tobacco control interventions
- guidance on the commissioning of dementia care, advising on integrated approaches to commissioning and making decisions based on NICE guidance and standards to help commissioners use their resources effectively.
- local government briefings for a range of topics, including public health. These briefings are meant for local authorities and their partner organisations in the health and voluntary sectors, in particular those involved with health and wellbeing boards. Their aims are to raise awareness of public health evidence, to demonstrate the potential role of NICE evidence and guidance as the basis of solutions to public health issues and to advise on value for money and return on investment.

4 Consultation and Engagement

4.1 NICE has very robust, inclusive and transparent consultation processes when producing our guidance and implementation resources. This aims to ensure that stakeholders influence the development of guidance and resources in several different ways, such as participating in guidance development groups or providing online feedback on draft documents.

4.1.1 The NHS has the tradition of being engaged in this way of partnership through their organisations. NICE would be very keen to explore how the Health and Wellbeing Board could support a joined up approach to engagement, positively influence the quality of NICE products and provide local opinion on the system challenges in using guidance and standards across the health and care sectors.

4.2 Equality and Diversity / Cohesion and Integration

4.2.1 There are no implications for Equality, Diversity, Cohesion or Integration arising from this report.

4.3 Resources and value for money

4.3.1 Using the guidance to inform service commissioning or service planning will help ensure that resources are used wisely to meet local needs as identified in JSNA and Health and Wellbeing Strategy.

4.4 Legal Implications, Access to Information and Call In

4.4.1 There are no legal or information access implications arising from this report. It is not subject to Call In.

4.5 Risk Management

4.5.1 Not using evidence to unpin commissioning intentions may have an impact on the quality, effectiveness and cost-effectiveness of services provided for the people of Leeds.

5 Conclusions

- 5.1 NICE produces independent evidence-based guidance on ways of improving health and well-being for local authorities, education, voluntary organisations and community groups as well as the NHS.
- 5.2 Using the guidance to inform service commissioning or service planning will help ensure that resources are used wisely to meet local needs as identified in JSNA and Health and Wellbeing Strategy.
- 5.3 It would it be appropriate to explore further the Board's approach to providing local leadership to ensure that NICE guidance, standards and resources are routinely considered in service planning, the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy. This would include the development of a plan for the Better Care Fund and those to create a sustainable Health and Social Care system. It should also be considered what further support might be required from NICE.

6 Recommendations

- 6.1 The Health and Wellbeing Board is asked to consider how they might work with NICE guidance, quality standards and implementation resources to ensure that strategic priorities continue to be underpinned by:
 - the best available evidence on improving health and wellbeing outcomes for the people of Leeds.
 - The best evidence available for what represents value for money.