# Policy for the dissemination, implementation and monitoring of NICE guidance

<table>
<thead>
<tr>
<th><strong>Title</strong></th>
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<tbody>
<tr>
<td><strong>Trust Ref No</strong></td>
<td>1539-49009</td>
</tr>
<tr>
<td><strong>Main points this document covers</strong></td>
<td>This policy details the responsibilities and processes associated with the dissemination, implementation and monitoring of NICE guidance processes within the Trust.</td>
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<tr>
<td><strong>Who is the document aimed at?</strong></td>
<td>All clinical staff</td>
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</tbody>
</table>
| **Authors** | Michelle Bramble Clinical Effectiveness Facilitator  
Andrew Thomas Compliance and Adult Safeguarding Lead |
| **Approved by** | Quality and Safety Delivery Group |
| **Approval Date** | 07 June 2012 |
| **Initial Equality Impact Screening** | No |
| **Full Equality Impact Assessment** | No |
| **Lead Director** | Steve Gregory, Director of Nursing |
| **Category** | Clinical |
| **Sub Category** |  |
| **Review Date** | Review date extended to 31st January 2020. |
| **Who the policy will be distributed to** | All clinical staff |
| **Method** | Electronically to senior managers for dissemination and via the Trust intranet for all clinical staff |
| **Document Links** |  |
| **Required by CQC** | Yes |
| **Required by NHSLA** | Yes |
| **Other** |  |
| **Amendments History** |  |
| **No** | Date | Amendment |
| 1 | May 2012 | Minor amendments made following NHSLA inspector visit in April 2012. |
| 2 | June 2012 | Minor amendments made following Quality and Safety Operational Group meeting 07 June 2012. |
| 3 | July 2014 | Routine review and amendments made to reflect changes in Trust titles |
| 4 | January 2019 | Names and title changes only. |
Policy for the dissemination, implementation and monitoring of NICE guidance

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1 Introduction

The National Institute for Health and Care Excellence (NICE) is the independent organisation responsible for providing national guidance on the promotion of good health and the prevention and treatment of ill health. NICE guidance is developed using the expertise of the NHS and the wider healthcare community including NHS staff, healthcare professionals, patients and carers, industry and the academic world.

NICE produces guidance on public health, health technologies and clinical practice. NICE also produce Quality Standards which are a set of specific, concise statements and associated measures. They set out aspirational, but achievable, markers of high-quality, cost-effective patient care, covering the treatment and prevention of different diseases and conditions.

2 Purpose

The purpose of this policy is to ensure that Shropshire Community Health NHS Trust (SCHT) has a robust mechanism for the dissemination, implementation and monitoring of NICE guidance.

This will ensure that:

- Patients experience the most up-to-date clinically and cost effective care.
- The Trust complies with the requirements for registration with the Care Quality Commission (CQC).

3 Definitions

3.1 Technology Appraisals.

Technology Appraisals are recommendations on the use of new and existing medicines and treatments within the NHS such as:

- Medicines
- Medical devices
- Diagnostic techniques
- Surgical procedures
- Health promotion activities

The NHS is legally obliged to fund and resource medicines and treatments recommended by Technology Appraisals usually within three months of publication.

3.2 Interventional Procedures.

An interventional procedure is a procedure used for diagnosis or for treatment that involves:

- Making a cut or a hole to gain access to the inside of a patient’s body – for example when carrying out an operation or inserting a tube into a blood vessel or
• Gaining access to a body cavity (digestive system, lungs, womb or bladder) without cutting into the body, for example examining or carrying out treatment via endoscopy or
• Using electromagnetic radiation (which includes X rays, lasers, gamma rays and ultraviolet light) for example using a laser to treat eye problems.

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.

3.3 Clinical Guidelines

Clinical Guidelines are recommendations by NICE on the appropriate treatment and care of people with specific diseases and conditions within the NHS. Clinical guidelines may:

• Provide recommendations for the treatment and care of people by health professionals
• Be used to develop standards to assess the clinical practice of individual health professionals.
• Be used in the education and training of health professionals.
• Help patients to make informed decisions
• Improve communication between patient and health professionals.

Unlike Technology Appraisals there is no legal obligation to implement clinical guidelines but they are based on the best available evidence and hence if challenged, failure to comply with a clinical guideline would require justification from a clinician. While clinical guidelines help health professionals in their work they do not replace their knowledge and skills.

3.4 Public Health Guidance.

NICE produces two types of guidance on public health:

• Public Health interventional guidance makes recommendations on specific activities to promote a healthy lifestyle or reduce the risk of developing a disease or condition. For example, giving advice in GP surgeries to encourage exercise.

• Public Health programme guidance deals with broader activities for promoting good health and preventing ill health. This guidance may focus on a topic such as smoking, particular population, such as young people or a particular setting.

3.5 NICE Quality Standards

NICE quality standards are a set of specific, concise statements that act as markers of high-quality, cost-effective patient care, covering the treatment and prevention of different diseases and conditions. Derived from the best available evidence such as NICE guidance and other evidence sources accredited by NHS Evidence, they are developed independently by NICE, in collaboration with the NHS and social care professionals, their partners and
service users, and address three dimensions of quality: clinical effectiveness, patient safety and patient experience.

3.6 NHS Evidence

NHS Evidence is a free service supporting the information needs of frontline staff working in health and social care. Users can access a comprehensive evidence base, including systematic reviews, accredited guidance and patient information. The web portal provides access to more than 170 reliable sources simultaneously including the National Institute for Health and Clinical Excellence, British National Formulary and the Cochrane Library: [www.evidence.nhs.uk](http://www.evidence.nhs.uk)

4 Duties

Chief Executive:

The Chief Executive has the ultimate responsibility for the implementation of NICE guidance and the Trust Board the responsibility of assuring compliance with the requirements for registration with the CQC.

Executive responsibilities:

All directors are responsible for assuring that NICE guidance is implemented within their directorates but within the Trust particular responsibility lies with the Director for Operations, the Director of Nursing and the Medical Director. Through them the Deputy Director Operations is responsible for ensuring that NICE guidance is implemented, where appropriate, within the directorate.

Heads of Nursing

The Heads of Nursing are responsible for ensuring that monthly updates are escalated via email to the Operations Directorate chairs of Quality and Safety Groups for discussion at meetings and if appropriate, identification of lead clinicians to assess the service against the guidance.

Service Managers and Clinical Leads.

Within services the service managers or clinical leads are responsible on a day to day basis for implementing NICE guidance relevant to their service. This may include an initial baseline assessment of service provision against the guidance, drawing up an action plan and providing assurance of implementation.

Chief Pharmacist

The Chief Pharmacist has a leading role in the implementation of NICE guidance particularly Technology Appraisals which are often related to the use of new or existing drugs. The Chief Pharmacist disseminates information and monitors implementation of technology appraisals relating to drugs and informs the Clinical Audit team of outcomes to ensure that the database is current.
Healthcare Professionals.

All health care professionals are expected to take full account of NICE guidance when exercising their clinical judgement. However, NICE guidance does not override the individual responsibility of clinicians to make appropriate decisions regarding individual patients according to their clinical circumstances.

Clinical Audit Facilitators

The Clinical Audit Facilitators are responsible for maintaining the NICE guidance database, recording feedback from services, updating action plans from services and ensuring that guidance is implemented within set time scales. The clinical audit team support the implementation of NICE guidance through encouraging the audit of NICE guidance and including it in the Trust Clinical Audit Programme.

Committee Responsibilities

The Quality and Safety Operational Group has overall responsibility for ensuring implementation and assurance for NICE guidance. A report is presented to the group on a regular basis by the Quality and Safety Facilitator. The Quality and Safety Operational Group reports to the Quality and Safety Committee which reports directly to the Board.

Below the Quality and Safety Operational Group each service has their own Quality and Safety group arrangements. NICE guidelines should be a standing agenda item at all local service meetings and any issues or concerns relating to NICE guidance will be reported to the Quality and Safety Operational Group.

5 Process for Dissemination and Monitoring of NICE Guidance including identification of whether guidelines are relevant to a service

NICE publishes a list of guidance on a monthly basis on the fourth Wednesday of each month on its website www.nice.org.uk. It is the responsibility of the Clinical Effectiveness Facilitator to check the website and identify all guidance issued during that month. A folder within the Clinical Governance folder which is accessible by the Clinical Audit Facilitators holds a Microsoft Access database that lists all guidance issued. By using a shared drive it is ensured that in the absence of the Quality and Safety Facilitator a nominated Clinical Audit Facilitator will be able to carry out this task.

The Clinical Effectiveness Facilitator sends an email to SDG Managers and Heads of Nursing listing the new guidance published during the preceding month. This should be carried out within ten working days of the guidance being issued by NICE.

A copy of the email is sent for information to:

- Chief Pharmacist
It is the responsibility of the SDG Managers to ensure that NICE guidelines are discussed at Quality and Safety groups within their areas and that such discussion is recorded in the minutes. If the guidelines discussed are not considered to be of relevance to the service then there is no further action to be taken and the service lead should inform the Heads of Nursing of this.

6 Implementation of NICE guidelines

In the event of a guideline being considered relevant to a service, the following actions should be taken:

The relevant Quality and Safety group should identify a suitable clinician to take the lead on implementation of the guidance and to carry out a gap analysis. The lead may wish to set up a working group to implement the guidance or work through an existing group.

The Clinical Audit Coordinator for the relevant service should be informed so that they can forward a copy of the guideline assessment proforma from the NICE website which is specifically designed for the assessment of each guideline to the identified lead. This will enable the lead to undertake a gap analysis of the guideline and formulate an action plan to address any shortfalls that may have been identified. The action plan should then be discussed at the local Quality and Safety group and its progress monitored at agreed intervals.

The Clinical Audit Facilitator will also forward a copy of the audit tool for the Guideline from the NICE website to the clinical lead. This will enable the clinical lead to identify any audit activity that may be required.

Once the discussions at local Quality and Safety level have taken place a completed copy of the action plan should be sent to the Clinical Audit Coordinator. This will be entered onto the NICE database with details of the action plan.

7 Actions to be taken when deciding not to implement NICE recommendations

Should a local Quality and Safety Group decide not to implement NICE guidance the following actions should be taken to explain why the decision has been made not to comply with the guidance:

- The rationale for this decision should be recorded in the minutes of group meetings.
- The chair of the group should report on this decision to the Quality and Safety Operational Group via the reporting matrix of that group.
- The decision may, if appropriate, be recorded in the local and corporate risk registers.
## 8 Monitoring compliance with this Policy

<table>
<thead>
<tr>
<th>Element to be monitored</th>
<th>Lead</th>
<th>Tool</th>
<th>Frequency</th>
<th>Reporting Arrangements</th>
<th>Acting on recommendations and leads</th>
<th>Change in practice and lessons to be shared</th>
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<tbody>
<tr>
<td>Duties</td>
<td>Lead Nurse for Quality</td>
<td>Spot check</td>
<td>Annual</td>
<td>A review of the duties will be carried out by Lead Nurse for Quality and reported upon via a regular report to the Quality and Safety Operational Group. The group will be asked to ensure that they are assured by the level of detail in the report relating to this topic.</td>
<td>Actions and recommendations will be undertaken by the Lead Nurse for Quality who will present the report to the group and receive feedback.</td>
<td>The Lead Nurse for Quality will be responsible for ensuring changes to practice are identified and actioned within a specified time frame.</td>
</tr>
<tr>
<td>Process for Dissemination, Implementation and Monitoring of NICE Guidance including identification of whether guidelines are relevant to a service</td>
<td>Lead Nurse for Quality</td>
<td>Quality Dashboard/ NICE database</td>
<td>Dashboard – monthly NICE database quarterly</td>
<td>The Lead Nurse for Quality will complete the NICE guidelines section of the quality dashboard on a monthly basis and report by exception to the Quality and Safety Committee. The Lead Nurse for Quality will interrogate the NICE database quarterly and report to the Quality and Safety Divisional meetings</td>
<td>Actions and recommendations from either forum will be undertaken by the Lead Nurse for Quality</td>
<td>Required changes to practice will be identified and actioned within a specific timeframe. Lessons will be shared with all stakeholders.</td>
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<tr>
<td>Process for implementation and monitoring of NICE guidelines</td>
<td>Lead Nurse for Quality</td>
<td>Review of action plans/ database</td>
<td>Quarterly</td>
<td>The Lead Nurse for Quality will interrogate the NICE database quarterly and report to the Quality and Safety Divisional Groups</td>
<td>Actions and recommendations will be undertaken by the Lead Nurse for Quality within a specified timeframe.</td>
<td>Required changes to practice will be identified and actioned within a specific timeframe. Lessons will be shared with all stakeholders.</td>
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</table>
9 Consultation

Consultation has taken place with the following members of staff:

Head of nursing Adults
Head of Nursing Children and Families
Deputy Director of Nursing and Quality
Clinical Services Managers
Risk Manager
Compliance and Adult Safeguarding Lead

10 References


The National Institute for Health and Clinical Excellence (NICE) website provides the full list of NICE guidance, quick reference guides, resources to support implementation, and further information: www.nice.org.uk.