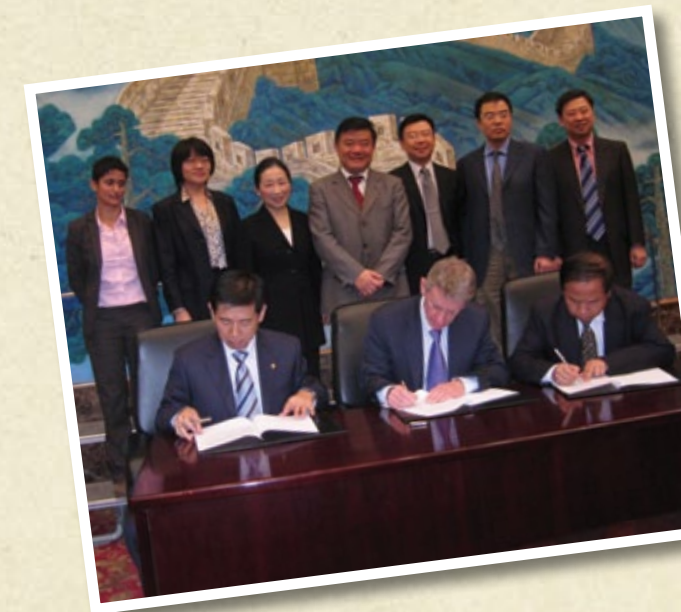


NICE International contributes to better health around the world through the more effective and equitable use of resources. It does this by providing advice on the use of evidence and social values in making clinical and policy decisions.



# NICE International Review 2011





# Dear friends,

Now in its fourth year, NICE International continues to go from strength to strength as it helps to improve the quality and efficiency of healthcare systems around the world.

NICE focuses on the UK. But over the years NICE's guidance and methods have generated substantial interest from researchers, non-governmental organisations, health insurance funds and ministries of health and finance across the globe.

NICE International was set up to respond to requests from around the world for help to improve evidence-based decisions about resource allocation in healthcare by improving systems, capacity and information-gathering. We do not attempt to replicate the UK model of healthcare or to transplant NICE into other countries' healthcare systems. Instead, we offer our advice and support on a not-for-profit basis to help countries deliver clinical and cost effective healthcare to the people who live there.

We aim to achieve this respecting each country's values and taking into account its disease burden, structure and resource constraints.

NICE's guidance and its methods and processes are all public goods. NICE International stays true to the principles of sharing, openness and transparency. We help governments develop their own products and ways of working, adapted to their own healthcare systems, values, needs and priorities. We have forged strong working relationships with many fellow policy makers and funders in the UK and beyond, promoting the work of NICE and the British National Health Service (NHS), as well as bringing back knowledge from other healthcare systems.

In this, our first review, we reflect on some of the exciting projects we have undertaken over the past year and offer snapshots of earlier work. We believe that NICE International can build on another successful year and continue to help the increasing number of national governments who are committing themselves to providing universal health coverage in an efficient and affordable way.

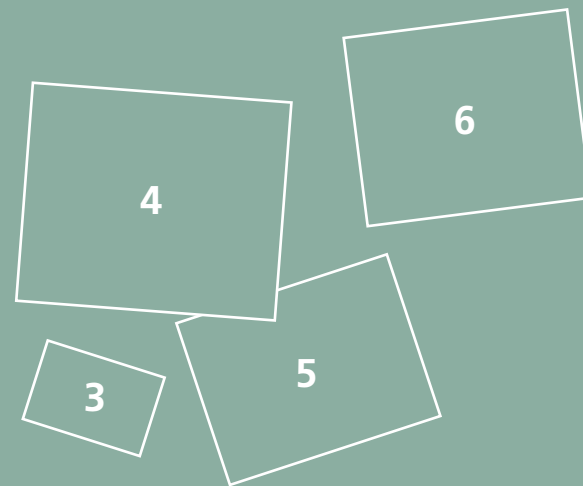
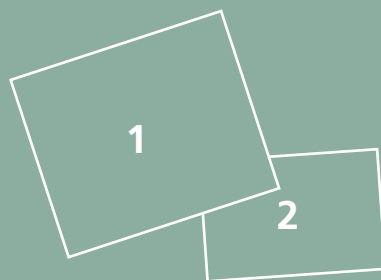


Sir Michael Rawlins  
Chairman of NICE

Dr Kalipso Chalkidou  
Director of NICE International

Back cover

Front cover



## 1 Turkey

NICE International helping the Turkish Guideline Development Group make recommendations for the Turkish guideline on caesarean section as part of a pilot project, at its first meeting in Ankara. January 2010

## 2 Colombia MoH

NICE Chairman Sir Michael Rawlins (far right) with former Colombian President Álvaro Uribe Vélez signing a memorandum of understanding between NICE and the Colombian Ministry of Social Protection. January 2009

## 3 India

The NICE International team and local participants at a workshop on guideline development methods for senior clinicians, policy makers and government officials from the Ministry of Health and Family Welfare. Hyderabad, India. August 2009

## 4 Kenya

During a visit in 2010 NICE International were invited to observe the emergency triage and treatment protocol in action at the children's emergency room at Mbagathi District hospital. Nairobi, Kenya. November 2010

## 5 Brazil HTA workshop

NICE International delivering a course on health technology assessment and evidence-based medicine to Brazilian Ministry of Health staff and other Brazilian policy makers. December 2010

## 6 China

Dr Chen Zhu, the Minister of Health of China (middle back – standing) witnesses the signing of a tripartite memorandum of understanding between NICE (Chief Executive Sir Andrew Dillon), the China National Health Development and Research Center (Professor Zhang ZhenZhong (right)) and The Ministry of Health (Dr Dezhi Yu (left)). The agreement outlines how NICE will work together with the Chinese government and CNHDRC in the context of the ongoing rural health reforms. October 2009



# Our journey

"If we can establish our own NICE in China, it will help us to regulate the healthcare service, and to use our limited resources more effectively, which will in turn create better value for individuals."

**Dr Dezhi Yu**  
Director, China National Health Development Research Center, China



"NICE International provides a unique mix of technical expertise and implementation know-how to help low- and middle-income countries build their own evidence-based priority-setting processes. NICE's practitioner-to-practitioner modality of technical assistance is truly unique in the field."

**Amanda Glassman**  
Director of Health Policy, Center for Global Development, USA



## January

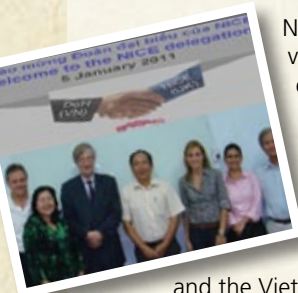
### Social value judgements inaugural workshop – University College London and NICE International

Working with the School of Public Policy at University College London (UCL), and in collaboration with a host of international partners, NICE International hosted the inaugural workshop of a multinational research project on value judgements in healthcare decision-making. By exploring and comparing the different social values that shape such decisions, the group aimed to develop a set of principles to guide policy makers in any country facing up to the challenge of healthcare prioritisation. The workshop attracted policy makers from across Europe, Asia and North America.

### Vietnam – scoping visit

NICE International visited Vietnam to explore how NICE could help with the country's ongoing health reforms.

In Hanoi, with support from the World Bank and the Vietnam-based Oxford University Clinical Research Unit, the NICE International team met senior Ministry of Health officials, including the then Vice-Minister and current Minister of Health of Vietnam and the health lead for the World Bank Vietnam country office. In Ho Chi Minh City, NICE International was hosted by the city's Department of Health and signed a memorandum of understanding committing both parties to further cooperation in improving quality and efficiency.



## February

### Thai health programme study tour to NICE

A delegation from the Thai Health Intervention and Technology Assessment Program (HITAP) visited NICE to share their experiences and to learn more about what NICE does. Colleagues from HITAP were also keen to talk about practical ways to make procedures independent and transparent, in particular how to declare and manage decision-makers' interests.

### Guiding health in Georgia

NICE International, with support from the UK's National Collaborating Centre for Mental Health, and NHS stroke consultants, worked with the Georgian Ministry of Labour, Health and Social Affairs to develop a clinical guideline on acute stroke and transient ischaemic attack, adapting the NICE guideline to the local needs and data. After training the Georgian technical team in systematic reviewing and health economics, NICE International helped the multidisciplinary guideline group develop country-relevant recommendations and quality standards for high priority recommendations, which can be incorporated in reimbursement and pay-for-performance schemes. The project also produced a manual for the ministry to develop clinical guidelines in Georgia in the future.



## March

### China – improving health services for the rural population

At the request of the Minister of Health of China, and with support from the UK's Department for International Development, the China National Health Development Research Center (CNHDRC) and NICE International set up a project aimed at improving the quality and efficiency of health services for China's rural population of more than 800 million people. We worked together with senior practising



NHS and Chinese clinicians expert in medicine, surgery and epidemiology to pilot best practice clinical pathways in hospitals in the ShaanXi and ChongQing provinces. The pathways aimed to address the problem of interventions and conditions that seemed to be driving up costs without improving outcomes, such as elective caesarean section and pharmacological management of hypertension.

Following the successful pilot, the approach is now being scaled up across more than 40 counties under the leadership of the Chinese Ministry of Health and CNHDRC.

Rationalising the payment and practice of elective caesarean section alone can generate savings of up to 220m yuan per year across rural China, or the equivalent of 100,000 additional normal deliveries, offered at no cost to women and their families.



## April

### Indian ministerial delegation

NICE International hosted an Indian ministerial delegation including the former Minister of Health and Family Welfare, the current Vice-Minister and senior clinicians leading on reforming the Indian medical education system. The visit, organised by the Department for International Development, strengthened existing institutional bonds between NICE and the Government of India as well as bodies such as the Administrative Staff College of India and marked the beginning of a fruitful cooperation with WellSpring, an innovative primary care service provider.

### Expert workshops on health economics and clinical guideline development in Colombia

NICE International delivered a series of workshops on health economics and clinical guideline development. Participants included local academics from several leading universities, including Pontificia Universidad Javeriana in Bogota, Universidad de Antioquia, and the Universidad Nacional. A further workshop was held in August 2011 with a final workshop held in Bogotá in February 2012.



## May

### "Is your medical innovation reimbursement proof?" A NICE International/Judge course

Policy makers, senior pharmaceutical and insurance industry executives, scientists and hospital managers from across Europe and North America came together for a two-day executive course hosted by NICE International and the Centre for Health Leadership & Enterprise at Cambridge Judge Business School. The programme included a series of interactive sessions based on real-world case studies and the faculty comprised NICE's senior technical, advisory and management leads as well as lecturers from the Cambridge MBA programme.

### Taiwanese ministerial visit

NICE International hosted a delegation of decision-makers from Taiwan headed by Taiwan's Minister of Health. During their visit delegates learnt about the principles that underpin NICE, its structure, governance, guidance processes and work programmes. Delegates also discussed with NICE's Chief Executive Sir Andrew Dillon opportunities for future cooperation between NICE and the Taiwanese Department of Health. Minister of Health Dr Wen-Ta Chiu said: "I wish to convey my sincere appreciation for your kind arrangements and reception during our visit to NICE. I was impressed by your expertise in health and clinical research, and am grateful for what I learned there."

## June

### Working with the Colombian government on the establishment of a health technology assessment and clinical guidelines agency

In collaboration with the Inter-American Development Bank, the team at NICE International explored how the Colombian Ministry of Social Protection could establish a Colombian version of NICE. The new organisation is called the Instituto de Evaluación Tecnológica en Salud and will be responsible for health technology assessment and healthcare guidelines in Colombia.

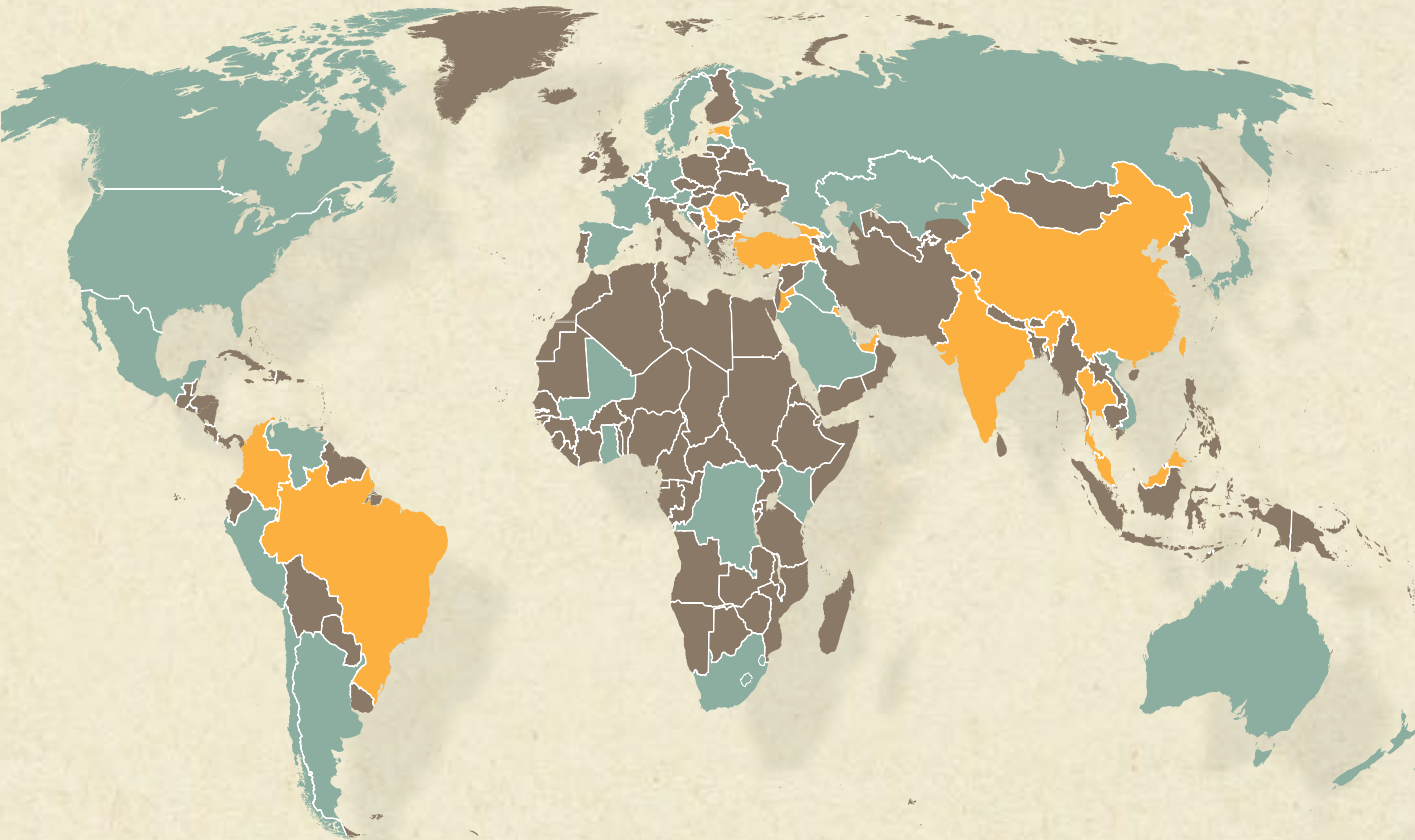
As part of the project NICE International worked with the Instituto de Efectividad Clínica y Sanitaria of Argentina to carry out an extensive cross-country analysis of prioritisation strategies used in Chile, Brazil and Uruguay in South America, and Germany, the Netherlands and the UK in Europe as well as Australia. The project included a workshop on using economic evaluation to inform decision-making in clinical guideline development. The NICE International team also highlighted some of the political and procedural issues around creating an organisation responsible for making evidenced-based health policy recommendations.





# NICE around the world

Since 2008, NICE International has delivered hands-on technical projects in 14 countries, helping build capacity, adapt guidelines, develop clinical pathways and performance standards, carry out cost-benefit evaluations of interventions and technologies, and boost governance and transparency in decision making. In another 36 countries, NICE International has engaged policy makers or formed partnerships with them – or both.



## List of countries

Projects	Engagements & Partners		
Abu Dhabi	Albania	Ghana	Russia
Brazil	Australia	Holland	Saudi Arabia
China	Austria	Hong Kong (SAR)	Singapore
Colombia	Argentina	Iraq	South Africa
Estonia	Azerbaijan	Japan	Spain
Georgia	Bahrain	Kazakhstan	Sweden
India	Canada	Kenya	USA
Jordan	Chile	Korea (South)	Venezuela
Kuwait	Congo (Democratic Republic)	Latvia	Vietnam
Malaysia	Croatia	Mali	
Romania	Denmark	Mexico	
Serbia	France	New Zealand	
Thailand	Germany	Norway	
Turkey		Peru	

## INTERVIEW



Ferdinando Regalia, Social Protection and Health Division Chief at Inter-America Development Bank has been working with NICE International to drive up the quality and efficiency of healthcare in Colombia.

“Although Colombia has one of the top healthcare systems in South America, there is increasing pressure on health expenditure mainly relating to the public financing of new technologies.

“About 20 per cent of all the payroll tax contributions that go into the health system are being used to finance high-tech drugs beyond the scope of the mandatory health plan. So this is a drainage on the resources of the health system in Colombia.

“By late 2010, it became clear that a strong institutional framework to guide healthcare in Colombia was needed. This led the government to create their own health technology assessment institute known as Instituto de Evaluación Tecnológica en Salud (IETS).

“Here at the Inter-American Development Bank we have a long tradition of providing help to the health sector in Colombia and were aware of the excellent work of NICE, which is known worldwide as a pioneer in the field of health technology assessment.

“We made the connection between NICE and the Colombian government to enable NICE to be selected as the key partner to help Colombia develop IETS.

“The team from NICE International helped to assess the strengths and weaknesses of the existing priority setting mechanisms and frameworks in Colombia, and has brought together evidence and experts from other countries to show how to effectively design a health technology assessment institute.

“NICE International also helped to prepare a business plan on how Colombia should design their health technology assessment institute and has had a strong impact on shaping IETS.

“Going forward, NICE International will continue to be involved with IETS by reviewing their first evaluation and helping them to improve their processes with ongoing coaching.

“Other countries in South America, such as Costa Rica, Ecuador, Peru, Uruguay and Mexico, have taken note and are considering following the Colombian model and set up similar health technology assessment institutes.

“It’s been an excellent experience and opportunity to be able to work with a team as dynamic as the one from NICE International. It’s a great team which has been very accommodating and flexible throughout the whole process. We hope to continue to good work.”

## CASE STUDY

# The Joint Learning Network

The Joint Learning Network for Universal Health Coverage is an innovative cross-learning platform that brings together low and middle income countries that are introducing health financing reforms to achieve universal health coverage for their populations. Working on the principles of practitioner-to-practitioner learning and cross-country exchange, the Joint Learning Network enables countries to share their experiences and the challenges of implementing their reforms through practical, issue-specific, problem-solving activities.

There are currently 10 member countries from Asia and Africa.



The Joint Learning Network focuses on four technical tracks based on demand from network members:

- provider payment mechanisms
- information technology
- quality
- expanding coverage

NICE International, together with the Institute for Health Improvement (IHI) is leading the work on the quality track, which focuses on improving the quality of care. They provide a structured environment for Joint Learning Network member countries to learn about the multiple options available for payer-led quality initiatives and to test new, innovative approaches to linking finance-driven initiatives that enhance the quality of their healthcare improvement reforms.

Activities cover a broad range of quality improvement methods including treatment guidelines and pathways, quality standards and provider accreditation. This takes place through regional and global face to face workshops, targeted training events, hands-on technical support and oversight of in-country demonstration projects, working alongside local policy makers, clinicians, regulators and patients.





# Our journey

"NICE is one of the most respected international organisations in healthcare. The Ministry of Health of Turkey, which has successfully implemented and sustained a major health reform, is pleased to express its strong willingness to continue its cooperation with NICE in this field."

**Professor Recep Akdağ**  
Minister of Health,  
Turkey



"As our true friend, NICE International brings rich experience of making transparent and evidence-informed policy with good understanding of and respect to the local context. Working with NICE International is sustainable development which means that you meet the needs of the present as well as enhancing your ability to be on your own in the future."

**Dr Yot Teerawattananon**  
Leader, Health Intervention and Technology Assessment Programme,  
Thailand



## July



### Renmin Conference 2011

Renmin University, which has a track record in offering administrative training to senior Chinese government officials, hosted the second annual NICE International/Renmin conference on health policy.

The focus was on quality and hospital performance and the audience included senior administrators and members of the Ministry of Health, the Ministry of Human Resources and Social Security and the National Development and Reform Committee.



## August

### Launch of the Joint Learning Network quality track

NICE International, with the Institute for Healthcare Improvement (USA), are supporting countries in South East Asia, Africa and Latin America identify and test new and innovative approaches of linking finance-driven initiatives to enhance the quality of their healthcare improvement reforms, for example by using accreditation or by tying quality standards to benefit packages and provider contracts. The work forms the quality track of the Joint Learning Network, a cross-learning platform for low and middle income countries that are in the process of introducing health financing reforms to achieve universal health coverage for their population. It is funded by the Rockefeller Foundation, with support from the World Bank, Department For International Development, Results for Development and the ACCESS Health Initiative.

## September

### Global Health 2011



NICE International co-hosted Global Health 2011 with the British Medical Journal Group. The conference brought together development funders, donor organisations, policy makers and government leaders from more than 25 countries. Over 150 people attended the event, including the Ministers of Health from Turkey and Vietnam, the CEO of AstraZeneca and representatives of the World Bank, the Inter-American Development Bank, the Wellcome Trust, the Gates Foundation, the Centre for Global Development and DFID. Discussions over the two days focused on ways to support healthcare leaders and decision makers operating in resource-constrained settings to make efficient and equitable resource allocation decisions.

Side meetings included visits to NICE's offices by the Ministers of Health of Vietnam and of Turkey, who discussed future collaborative work with NICE's senior management, and a session coordinated by the Inter-American Development Bank bringing together healthcare leaders from eight countries of the Latin American and the Caribbean region.

## October

### Center for Global Development working group meeting hosted by NICE

NICE hosted and participated in the second Center for Global Development Working Group meeting on priority setting institutions. The group aimed to identify how processes and institutions can transparently and ethically translate scientific and economic evidence and social preferences about health technologies into on-budget priorities in low and middle income countries. They also discussed current and potential international support for priority-setting institutions by donors and national governments. They recognised that shared regional or global information, institutional design input, technical accompaniment and peer support would add much-needed value to traditionally opaque methods of resource allocation. The group's report will be published in 2012.

### High-level talks with the Mexican Ministry of Health

NICE International Director Kalipso Chalkidou took part as a member of the British delegation in high-level economic talks between the UK and Mexico in Mexico City. This was at the request of the Mexican Ministry of Health and with the support of the Mexican Ministry of Foreign Affairs and the Inter-American Development Bank. Building on the momentum of the talks and a series of side meetings held with the Dirección General de Planeación y Desarrollo, the National Centre for Health Technology Excellence (CENETEC) and Mexico's food and drug regulatory agency (COFEPRIS), NICE and the Mexican Ministry of Health are now formalising their commitment to collaborate and negotiating a memorandum of association.

## November

### Evaluation of the Thai Health Intervention and Technology Assessment Program



The Thai Health Intervention and Technology Assessment Program (HITAP) is one of the best-developed institutional models for evidence-informed resource allocation in the world, having informed the Thai Essential Drug list and national policies on HIV prevention, alcohol abuse and immunisation. NICE International joined a team from the London School of Hygiene and Tropical Medicine, and Korean and Thai experts for the second external evaluation of HITAP. In response to the first evaluation in 2008, to which NICE International contributed, HITAP is launching a process manual to better guide external stakeholder engagement with its processes. The results of the latest evaluation and HITAP's response will be published in 2012.

### Supporting the Malaysian government

NICE International, with support from the World Health Organisation, offered advice to the Malaysian Ministry of Health and the National Health Financing division about developing a basic health package as Malaysia moves towards a health insurance scheme.

## December

### Advising the Romanian government about a basic care package

The Romanian Ministry of Health asked NICE International to help it identify what should be included and what should be left out of its basic healthcare service package. The project was funded by the World Bank and included objectives such as developing a 'negative list' excluding and/or restricting certain technologies and services from reimbursement and tackling unnecessary lengthy in-hospital stays, for certain conditions. NICE International also highlighted the importance of addressing other areas of inefficiency such as inaccurate hospital payment systems, lack of data collection mechanisms, and procurement problems.





# NICE International – the facts

**NICE International** operates on a strict **not-for-profit, fee-for-service basis**. No NHS funds go towards supporting our international activities.

**NICE International** was established in

**2008**

NICE International:

- **Empowers decision makers** in low and middle income countries by identifying and helping them to act on their **own** policy priorities
- Offers **collaborative problem-solving and hands-on support**, drawing on experience from the *UK and abroad*, to **adapt** evidence and policies to the local context
- Emphasises **institutional structure, longer-term capacity building and systems governance**

**5** Total number of current staff at NICE International

**14** Number of countries in which NICE International has delivered hands-on technical projects since 2008

**32** Foreign delegations hosted by NICE International in 2011

**13 YEARS**  
NICE's experience in the UK

# Thank you for your support


We would like to thank the following organisations and individuals for their ongoing support of the work of NICE International.

## Organisations

- Center for Global Development (USA)
- Center for Medical Technology Policy (USA)
- China National Health Development Research Center (China)
- Commonwealth Fund (USA)
- Department for International Development (UK)
- Department of Health (UK)
- Foreign and Commonwealth Office (UK)
- Health Intervention and Technology Assessment Program (Thailand)
- Inter-American Development Bank (USA)
- Pan American Health Organisation (USA)
- Rockefeller Foundation (USA)
- Tropical Health and Education Trust (UK)
- UK Trade and Investment (UK)
- Wellcome Trust (UK)
- World Bank (USA)
- World Health Organisation (Switzerland)

## NICE International Advisory Group

- Dr Michael Borowitz, Organization of Economic Cooperation and Development, France
- Dr Carlos Santos Burgoa, Pan American Health Organisation, USA
- Dr Tsung-Mei Cheng, Princeton University, USA
- Professor Anthony Culyer, University of Toronto, Canada; University of York, UK
- Professor Shah Ebrahim, London School of Hygiene & Tropical Medicine, UK; Director, South Asia Centre for Chronic Disease, New Delhi, India
- Mr Kees de Joncheere, WHO Regional office for Europe, Switzerland
- Ms Amanda Glassman, Center for Global Development, USA
- Mrs Martha Gyansa-Lutterodt, Ministry of Health, Ghana
- Dr Rob Hecht, Results for Development, USA (Chair)
- Dr Suzanne Hill, Pharmaceutical Benefits Division, Department of Health and Ageing (member from 2008 – 2011), Australia
- Dr Ruth Levine, The William and Flora Hewlett Foundation (member from 2008 – 2010), USA
- Professor Martin McKee, European Public Health Observatory and London School of Hygiene and Tropical Medicine, UK
- Professor Sir Michael Rawlins, NICE, UK
- Emeritus Professor Lloyd Sansom AO, Department of Health and Ageing, Australia
- Professor Rodrigo R Soares, Pontifícia Universidade Católica do Rio de Janeiro, Brazil

  
**National Institute for Health and Clinical Excellence**

**Write to us at:**  
MidCity Place  
71 High Holborn  
London, WC1V 6NA  
United Kingdom

 **NICE International**

**Email us at:**  
[niceinternational@nice.org.uk](mailto:niceinternational@nice.org.uk)  
**Follow us on:**  
[twitter.com/nice\\_intl](https://twitter.com/nice_intl)  
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NICE International is a division of the National Institute for Health and Clinical Excellence, a Special Health Authority in the British National Health Service. NICE International operates on a not-for-profit basis.

