



Review

2013



Thank you for your support.

We would like to thank all the individuals and organisations who have provided their ongoing support to the work of NICE International, especially the Rockefeller Foundation, World Bank, Pan American Health Organisation and UK's Department of Health and Department for International Development.

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NICE International is celebrating its sixth birthday in 2014. Over the past year, we have had the privilege of reinforcing our partnership with the new administration of the Chinese Health and National Planning Commission and signed a bilateral agreement with the leadership of the Indian Ministry of Health and Family Welfare.

The Rockefeller Foundation has given funding to NICE International over the period 2012-2014, to support a series of initiatives with the Ministry of Health and associated agencies, including The National Health Insurance Agency (NHIA), The Ghana Health Service (GHS, the largest provider agency) and the Ghana National Drugs Programme. The key objective of this cooperation is to raise awareness among stakeholders in Ghana on the role and value of using evidence-based approaches in healthcare decision making and priority setting, including performance monitoring. Such approaches are considered a key element in ensuring greater efficiency and better outcomes in healthcare delivery, and support the drive towards universal healthcare coverage.

Furthermore, we have been able to solidify our engagement with the Vietnamese authorities, at the request of the country's Minister of Health. Throughout 2013, NICE International's team have been active in Ecuador, Afghanistan, South Africa, Ghana, the Philippines and Kazakhstan.

In parallel to our country engagements, we have been strengthening our partnership with major donors, such as the Rockefeller Foundation and the UK's Department for International Development, and with the new leadership of the World Bank. All three organisations are explicitly committed to Universal Healthcare Coverage, as is NICE. Most importantly, 2013 has been the year we received our inaugural grant from the Bill and Melinda Gates Foundation, what we hope will be the beginning of a long partnership with a view to strengthening evidence based decision making in developing countries and also in donor agencies.



Working together with long term friends and partners such as the Thai HITAP, the Washington-based Centre for Global Development and major academic players such as the University of York, King's College, London and the National University of Singapore, we look forward further to strengthening our growing global network in order to respond to the growing demand for technical cooperation aimed at making global resource allocation decisions more evidence base, more efficient, and fairer.




In October 2013, NICE International and the Thai Health Intervention and Technology Assessment Programme (HITAP) conducted a scoping visit to assess current need and to begin to specify future activities. There were three objectives to the visit. First, to gain an understanding of the key stakeholder agencies within the Ghanaian health system, the current situation and the challenges they face; second, to identify areas where the expertise/experience of NICE and HITAP may be relevant to Ghana, to help overcome some of the current challenges; and third, to raise awareness among stakeholders in Ghana on the role and value of using evidence-based approaches in healthcare decision-making and priority setting.



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Global Health Diplomacy

NICE International convened a forum on Global Health Diplomacy, Universal Healthcare Coverage (UHC) and Healthcare Priority-Setting at the Rockefeller Foundation Center in Bellagio. This built on the resolution passed by the United Nation General Assembly in December 2012 inviting “Member States to recognize the links between the promotion of universal health coverage and other foreign policy issues”. The Bellagio event brought together senior policy makers from emerging countries and the West, academics/researchers as well as donors.



Statement text

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NICE International is funded by the Rockefeller Foundation during 2012 – 2014 to support the Ministry of Health, in partnership with the Vietnam Health Economics Association (VHEA), in developing two key aspects of a comprehensive national quality strategy; Evidence-informed quality standards, and Review of basic package design. This work contributes to Vietnam’s 2012 – 2016 health strategy to improve care quality in different tiers of hospitals and marks the start of a long-term partnership with Vietnam

Following a scoping visit in December 2012, NICE International conducted a situational analysis in conjunction with VHEA. This identified a general need for defined processes to determine what services would be available to patients in health services, and stroke care as a specific priority for improvement through the implementation of quality standards. This mapping exercise was combined with a multi-stakeholder training workshop in Hanoi in May 2013, on health technology assessment, guidelines, quality standards and indicators.



In November, NICE International also completed the first phase of basic package review. This included interviews and group discussions to outline current mechanisms for basic package design, and a training event at Hanoi Medical University introducing a principle-based approach to health technology assessment in policymaking. The recommendations arising from this work, alongside the quality standards pilot, will inform the changes to existing clinical decision-making processes necessary for increased quality and sustainability in high-priority areas of healthcare. Both outputs will support the Ministry of Health in their commitment towards universal health coverage.



A delegation, led by the Vice Minister for Health, Madame Xuyen spent five days with NICE to help inform the Ministry’s strategy for quality improvement. The group learnt about the structure of the NHS, NICE HTA processes, the development and Implementation of guidelines, Quality Standards including pay for performance schemes and the role and structure of Primary Care in the UK. They visited the Health and Social Care Information Centre and the stroke Unit at St Thomas’ hospital in London. The Study Tour was funded by the Joint Learning Fund. Summarising her experience of the Study Tour Madame Xuyen said: “This is one of the best trips I have ever participated in. I have learned a lot from UK’s health care system, such as health information management... On behalf of delegation, I would like to thank you so much for the strongly support”.



With NICE International’s assistance, our Vietnamese partners recruited a QS Committee (comprising stroke clinicians from different regions and hospital tiers in Vietnam) and convened a workshop in November 2013, producing a shortlist of locally relevant clinical recommendations from UK evidence-based stroke guidelines. Two further workshops are scheduled in 2014 to develop these recommendations into measurable quality statements, and a plan to implement the quality standards in selected hospitals.



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NICE International was awarded a 2-year grant, starting in 2013, by the Rockefeller Foundation. Working with key Filipino policy makers and academics, the focus of the work is on strengthening priority setting methods and processes in the Philippines, a critical factor in supporting broader and more equitable healthcare coverage.

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A number of specific topics have been identified relating to vaccine evaluation techniques, benefit package optimisation by means of developing evidence-based pathways of care, and the processes and methods used by the Formulary Executive Committee (FEC) when making drug inclusion/exclusion decisions. These key areas represent the foundations of the engagement, and involve training workshops, peer review of methods manuals, and direct support for bespoke economic evaluations to guide decision making.

Since the start of the grant, there have been a number of key achievements led by the Philippine DOH team and the FEC based on NICE International advice and HITAP support. These include a commitment to develop a comprehensive "Methods Manual" to guide researchers and sponsors in conducting health technology assessments, and the development of two Philippine relevant economic models to evaluate PCV and HPV vaccines, to be used in future FEC decision making.



Future planned activities include further HTA training particularly in relation to the measurement of health-related quality of life, and support in the development of robust clinical guidelines and pathways to help underpin effective benefit package design.

Application of HTA in priority setting

As part of on-going technical support in health technology assessment (HTA) and evidence-based policy making in the Philippines an introductory workshop on the application of HTA in priority setting was delivered. Participants included members of the Formulary Executive Committee; academic partners who are or will be involved in developing local assessments to support decision making; representatives of the social insurer, Philhealth, and the Philippine Food and Drug Administration; and members of the National Center for Pharmaceutical Access and Management (NCPAM) secretariat.



A further workshop on the use of EuroQol's EQ-5D instrument in decision making is being organised for 2014.

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NICE International's institutional partners on this project – HITAP of Thailand – are providing expert support on vaccine evaluation to representatives of the National Center for Pharmaceutical Access and Management (NCPAM) within the Philippine Department of Health (DOH), and key academics among others involved in decision making. This engagement includes training and hands-on technical support in the development of localised economic models for human papillomavirus (HPV) vaccine and pneumococcal conjugated vaccine (PCV). The two vaccines were selected because they are key issues for policy makers in the Philippines, and HITAP has extensive expertise and experience when it comes to evaluating these technologies.



Vaccines Training

NICE International participated in a three-day training workshop in Tagatay, Philippines. The workshop was led by Thai partners on this project, the Health Intervention and Technology Assessment Program (HITAP). HITAP are providing expert support on vaccine evaluation to representatives of the Philippine Department of Health and PhilHealth, the national health insurance program of the Philippines, among others. This work includes training and hands-on technical support in the development of localised economic models for human papillomavirus (HPV) vaccine and pneumococcal conjugated vaccine (PCV). The two vaccines were selected because they are key issues for policy makers in the Philippines, and HITAP has extensive expertise and experience in the assessment of these particular technologies.



NICE Around the world

Over the past six years, NICE International has delivered hands-on technical projects in 35 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 42 countries, NICE International has engaged policy makers or formed partnerships with them – or both.

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Kasakhstan

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Yemen

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Vietnam

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Kenya

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Sri Lanka

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In India NICE international engaged both at national level and at state level. At national level NICE signed a Memorandum of Understanding (MoU) with India's Department for Health Research/Indian Medical Research Council (ICMR). This creates provisions for collaborative projects to develop technical and institutional capacity in India, strengthening of existing institutions responsible for turning evidence to policy; and joint awareness raising and policy advocacy through global donors.

At state level, NICE International assisted the government of Kerala develop and implement the first Quality Standard to improve maternal Care in maternity hospitals. This was an initiative led by the former principal Secretary of Health and the National Rural Health Mission (NRHM) in partnership with Kerala Federation of Obstetrician and Gynaecologists (KFOG) and Department of Health Education. The document was launched in January 2013 by the Kerala Chief Minister, Health Minister, Principal Health Secretary and UK Public Health Minister Anna Soubry and also representatives from the Foreign Commonwealth Office (FCO)



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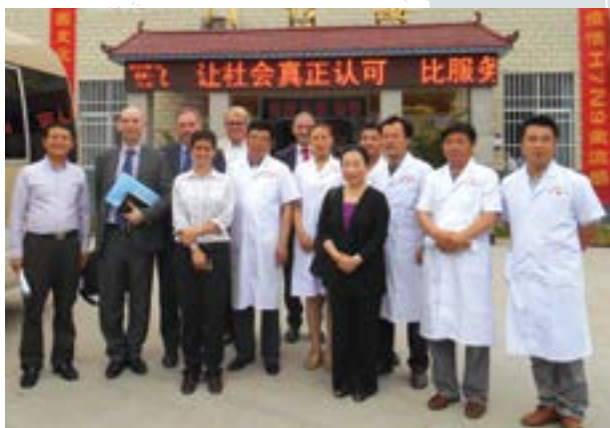
NICE International organised a study Tour on cancer quality improvement, funded by the Joint Learning Fund (JLF) for a delegation from the Vajapayee Arogyasri Scheme (VAS) in Karnataka that provides access to tertiary medical treatment to 30 Million below-Poverty Line patients. The delegation is adapting cancer guidelines and implementation plan to roll out in Karnataka.



The Quality Standard was implemented on the 1st April in eight hospitals in Kerala (six public and 2 private) for 12 months. Over four hundred maternity staff were trained, equipment purchased, hospital staff redeployed and new labour registers printed. Review meetings are held monthly and chaired by the NRHM Director. Early results indicate that the QS has led to major improvement in the process of care.



On-going reforms to China's public hospitals has included an interest in developing evidence-based care pathways with a focus on cost control while at same time raising the overall quality of services provided. The China National Health Development and Research Centre (CNHDRC) in collaboration with National Institute for Health and Clinical Excellence (NICE International) have embarked on a pilot project involving the design and implementation of evidence informed pathways of care, linked with payment reform, for two high priority disease areas (chronic obstructive pulmonary disease [COPD] and stroke). This builds on the initial (Phase I) 'Clinical Pathways' (CP) project associated with the Health XI initiative and initiated in 2009. The current study receives funding support from the THET-managed Health Partnerships Scheme and DFID China.



The key intervention is the implementation of clinical pathways in stroke and COPD. The intervention itself was developed during two broad phases of activity: in the first phase, a situational analysis was undertaken to establish the current situation with regards to key policy priorities, healthcare prioritisation strategies and decision-making processes in the four counties selected for clinical pathway implementation (Wen, Qianjian, Hanbin and Jiaonan). During the second phase, based on existing treatment strategies and with iterative input from experts in China and the UK, clinical pathways for stroke and COPD (the selected topics) were developed for implementation. The development of the pathways involved UK experts visiting the pilot hospitals and meeting with local clinicians and managers to discuss evidence-based practice.

An interrupted time series analysis will be undertaken with the aim of assessing the impact these clinical pathways on a focussed set of quality metrics based on already routinely collected data, and on costs. In addition, a qualitative assessment will be made based on structured interviews with key hospital staff involved in the implementation of the clinical pathways. Information captured in this way will include changes in the perceived understanding of effective COPD or stroke care among clinicians and patients and practicalities of implementation (for example, in relation to IT needs).



The Chairman of NICE and the Director of NICE International spent a few days in Beijing meeting with NICE's major partners in China and publicising NICE's work in the rural health reforms.



The meetings included a day-long meeting at Renmin University, the fifth annual bilateral conference between NICE and Renmin, which, this year, was focused on care quality, hospital reform and the role of integrated care, including primary care.

On the second day of the visit we met with senior officials from the World Bank and with our long-term partners in China, the think tank of the ministry of health, the China National Health and Development Research Centre (CNHDRC). We discussed progress with implementation of our NCD clinical pathways across four rural pilot counties and plans for scaling the pilots up. NICE met Vice Minister Ma where the Vice Minister called for NICE to continue and intensify its involvement in the Chinese health reforms. The Minister called for a strategic partnership between NICE, the Ministry and CNHDRC for institutionalising a Chinese model of Health Technology



Implementation of the pathways has already initiated with initial findings expected within the first half of 2014. The implementation of evidence-based pathways for non-communicable diseases in rural China has the potential to contribute to significant improvements in service efficiency and also the quality of healthcare provided. This study will not only help support considerations for wider scale up in rural China, but also foster 'South-South' collaboration by means of creating a knowledge base that can be disseminated to other countries undergoing similar health system reform and facing similar challenges.

Equador

NICE International, at the invitation of ENFARMA, the national drugs company of Ecuador, and the Ministry of Science, Technology and Innovation, met with Ecuadorian policy makers, including the Ministry of Health and the Ministry for Coordination of public programmes, over two days in Quito. We shared experiences in relation to quality standards and economic evaluation, pricing of pharmaceuticals and guideline development.

Brazil

With support from the UK's Department of Health Global Health Team, and in the context of the bilateral Memorandum of understanding (MoU) between the UK and Brazil, NICE International ran a joint workshop with the Secretariat for Science and Technology of the MoH, the National Health Surveillance Agency (Agência Nacional de Vigilância Sanitária, ANVISA) the regulator, and the National Commission on Incorporation of Technologies (CONITEC), the new Brazilian committee responsible for listing pharmaceutical products. The workshop was opened by the Secretary for Science and Technology, Dr Carlos Gadelha.

South Africa

In the context of the bilateral MoU between the Ministries of Health of the UK and South Africa, and following a request for know-how sharing by the Minister of Health of South Africa, Dr Pakishe Aaron Motsoaledi, NICE International visited Johannesburg and Pretoria in March 2013, to meet with



colleagues in the National Department of Health as well as other major stakeholders. Key priorities across stakeholders included the need to set up a priority setting mechanism for technologies, using Health Technology Assessment, including but not limited to pharmaceuticals, in order to sustain efficiency and quality in the context of the National Health Insurance (NHI) reforms; helping strengthen the institutional and governance arrangements for designing a benefits package for NHI; building technical capacity and quality assuring the process and actual products during the early stages and informing



population level public health initiatives for prevention of chronic disease.

Thailand

HTAsiaLink members, including NICE International, met at a pre-meeting organised by HITAP before the official opening of the Prince Mahidol Award Conference for 2013. The open session of the pre-meeting included for the first time the Philippines, there were also representatives from government and academe from Thailand, Taiwan, Korea, China, Singapore, Malaysia and Australia. Presentations gave an overview of the situation with HTA and its links to policy making and decisions on listing of technologies and included planning for the forthcoming HTAsiaLink conference in Penang, in May 2013.

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