

# NICE: Supporting quality and quality improvement

Chris Connell

Associate Director – Field team (South)

[Chris.connell@nice.org.uk](mailto:Chris.connell@nice.org.uk)

# Overview

- About NICE and alignment to social care
- NICE guidelines and standards
- How NICE supports quality improvement
- Resource to support quality and quality improvement

# Outcomes

- Clarity and understanding about how NICE guidelines supports quality
- Understanding of purpose and potential of NICE quality standards
- Awareness and understanding of resource available to support quality and drive quality improvement

# Role of NICE

*The national point of reference for advice on safe, effective and cost effective practice in health and social care, providing guidance, advice and standards aligned to the needs of its users and the demands of a resource constrained system.*



# NICE's work



**NICE**

# We work in partnership with others



NICE's position in adult social care

# Person centred care

Home > About > NICE Communities > NICE and the public

## Making decisions about your care

You can use our [our guidance and advice](#) to find out what recommendations NICE has made about your condition or care needs. Our guidance goes beyond NHS care to cover social care and public health.

Find out more about how to access treatment and care recommended by us, below.



### Your care

It's your right to be involved in making choices about your care. To make a decision, you need to know what your options are and what might happen if you don't want any treatment or care.

Get information on what to do:

- before you see your health or care professional
- when you see your health or care professional
- when involving other people
- when you can't give consent.



### Shared decision making

Shared decision making is when health professionals and patients work together. It puts you at the centre of decisions about your own treatment and care.

This means that:

- different choices available to the patient are discussed
- care or treatment options are explored in full, along with the risks and benefits
- patients reach a decision with their health and social care professional.

# NICE guidelines

- NICE guidelines are comprehensive sets of recommendations based on the best available evidence. They describe:
  - what is effective (will result in the best outcomes)
  - what is cost effective (best value for money)
- Set out the care and services suitable for most people with a specific condition or need, and people in particular circumstances or settings
- Support person-centred care
- Developed by independent advisory committees involving providers, commissioners, people who use services, carers and professionals / practitioners
- Kept up to date
- **Linked to legislation**

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# Why use guidelines

- They can help you provide assurance that resources are being used wisely, in effective service planning and commissioning
- **Specify the quality of care** you want to see – to improve health and wellbeing outcomes
- Reduce inequalities and unwarranted variation
- **Supports quality improvement activities**
- Provides local accountability and supports regulatory inspection
- Help shape the market
- Link to legislation



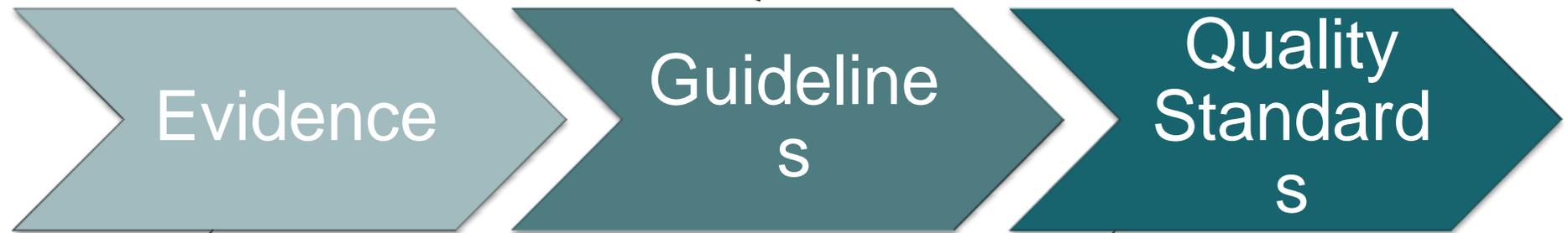
NICE guidance takes into account both effectiveness and cost effectiveness

# Guidance and quality standards supporting quality in social care

Topic and pathway	Guidance	QS
<u>Intermediate care including reablement</u>	<u>Available</u>	<u>August 2018</u>
<u>Managing medicines in care homes</u>	<u>Available</u>	<u>Available</u>
<u>Managing medicines for adults receiving social care in the community</u>	<u>Available</u>	<u>July 18</u>
<u>Mental wellbeing in older people</u>	<u>Available</u>	<u>Available</u>
<u>Pressure ulcers</u>	<u>Available</u>	<u>Available</u>
<u>Falls</u>	<u>Available</u>	<u>Available</u>
<u>Supporting people to live well with dementia</u>	<u>Available</u>	<u>Available</u>
<u>Delirium</u>	<u>Available</u>	<u>Available</u>
<u>Home care for older people</u>	<u>Available</u>	<u>Available</u>
<u>Nutrition</u>	<u>Available</u>	<u>Available</u>
<u>Transition between inpatient hospital settings and community or care home settings</u>	<u>Available</u>	<u>Available</u>
<u>Oral health for adults in care homes</u>	<u>Available</u>	<u>Available</u>

# Quality standards for quality improvement

A set of systematically developed, action-oriented recommendations to guide decisions for a particular area of care or health issue



Research studies - experimental and observational, quantitative and qualitative, process evaluations, descriptions of experience, case studies

A prioritised set of statements designed to drive and measure quality improvement in specific areas of care.

# Quality standards

- Set of statements to help you improve quality
- Information on how to measure progress

**Commissioners** use quality standards to ensure that high-quality care or services are being commissioned.

**Service providers** use quality standards to monitor service improvements, to show that high-quality care or services are being provided and highlight areas for improvements.

**Health, public health and social care practitioners** use audit and governance reports to demonstrate the quality of care, as described in a quality standard, or in professional development and validation.

**Regulators** like the Care Quality Commission and Ofsted endorse the use of quality standards to help identify and define good quality care.

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## QS85 Medicines management in care homes

### List of quality statements

Quality statement 1: Record-keeping

Quality statement 2: Sharing information

Quality statement 3: Self-administration

Quality statement 4: Prescribing medicines

Quality statement 5: Medication reviews

Quality statement 6: Covert medicines administration

# Quality standard for older people with multiple long-term conditions

Quality standard [QS132] Published date: September 2016

Quality standard Tools and resources History

Overview

Introduction

Quality statements

Quality statement 1: Including physical and mental health needs in a care and support needs assessment

Quality statement 2: Discussing services that could help at a care and support needs assessment

Quality statement 3: Named care coordinator

Quality statement 4: Care and support plan

Quality statement 5: Review of care and support plan

How to use this quality standard

Accessibility, equality and language

## Quality standard

## List of quality statements

[Statement 1](#). Older people with multiple long-term conditions having a care and support needs assessment that includes their physical and mental health needs.

[Statement 2](#). Older people with multiple long-term conditions having a care and support needs assessment that discusses services that could help, any cost of these services and how they can be paid for.

[Statement 3](#). Older people with multiple long-term conditions and eligible social care needs have a named care coordinator.

[Statement 4](#). Older people with multiple long-term conditions and eligible social care needs have an agreed care and support plan that includes how their personal priorities and outcomes will be met.

[Statement 5](#). Older people with multiple long-term conditions and eligible social care needs have a review of their care and support plan at least once a year.

Typically around 4-6 statements

Define priority areas for quality improvement: areas where there is variation

Based on best available evidence such as NICE guidance and other evidence sources accredited by NICE

physical and mental health needs in a care and support needs assessment

Quality statement 2: Discussing services that could help at a care and support needs assessment

Quality statement 3: Named care coordinator

**Quality statement 4: Care planning**

Quality statement 5: Review of health and social care plan

Using the quality standard

Diversity, equality and language

Development sources

Related NICE quality standards

Quality standards advisory committee and NICE project team

About this quality standard

## Quality statement 4: Care planning



Next >

[Quality statement](#)

[Rationale](#)

[Quality measures](#)

[What the quality statement means for service providers, health and social care practitioners, and commissioners](#)

[What the quality statement means for people using services and carers](#)

[Source guidance](#)

[Definitions of terms used in this quality statement](#)

[Equality and diversity considerations](#)

### Quality statement

Older people with multiple long-term conditions and eligible social care needs have an agreed health and social care plan that includes how their personal priorities and outcomes will be met.

### Rationale

A health and social care plan for older people with multiple long-term conditions and eligible social care needs will clarify how their health and social care needs will be met. They should be involved in developing their health and social care plan to ensure it is person-centred and focused on their priorities and outcomes. Ensuring all parties, including the older person, their carers or advocate and care practitioners, agree with and sign the health and social care plan will encourage joint ownership of the plan and confirm agreement with its content. This will help older people and their carers to consider whether the plan meets their needs and will improve their quality of life.

### Quality measures

#### Structure

a) Evidence of local processes to ensure that older people with multiple long-term conditions and eligible social care needs are involved in developing and agreeing their health and social care plan.

*Data source:* Local data collection.

# How to use quality standards

NICE...

standards and Indicators

## How to use quality standards

Quality standards help you improve the quality of care you provide to your patients or commission.

How to:

[Identify gaps and areas for improvement](#)  
[Measure the quality of care](#)  
[Understand how to improve care](#)  
[Demonstrate you provide quality care](#)  
[Commission high-quality services.](#)

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### How other organisations use quality standards

[View case studies](#)

### Assess your service against quality standards

This template will help you:

- assess current practice
- develop an action plan
- monitor quality improvement.

# NICE Tools and resources to support quality improvement

# Into practice resources – developing a NICE process



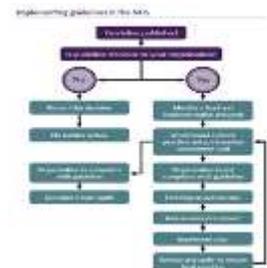
Practical steps to improve the quality of care and services using NICE guidance

Principles for putting evidence-based guidance into practice



How NICE guidance and standards can help you

Implementation flowcharts



## Resource planner (formerly known as the forward planner)

Our tool to help you plan for and implement NICE guidance. Use it to:



View upcoming NICE guidance



Get indicative costs or savings for upcoming guidance



Understand the resource implications of published guidance

Download

### View upcoming guidance

#### Planned guidance for current and future financial years

The resource planner lists all guidance that is due to publish over the next 2 financial years. Filter by type, potential resource impact and by providers or commissioners to find guidance relevant to you.

#### Guidance development information

The planner links to the latest guidance development documents for detailed information on topics being developed.

### Get indicative costs or savings for upcoming guidance

#### Resource impact estimates

We estimate the potential costs or savings associated with implementing upcoming guidance and highlight any areas of resource impact.

Publication date	Guidance title

# Resources to support implementation

## Intermediate care including reablement

NICE guideline [NG74] Published date: September 2017 [Uptake of this guidance](#)

Guidance

Tools and resources

Information for the public

Evidence

History

### Tools and resources

Tools to help you put the guidance into practice.

#### Tailored education support

> [Quick care guide: Intermediate care including reablement](#)

> [NICE/SCIE: Intermediate care webinar discussion of the key issues for social care \(January 2018\)](#)

#### Resource impact tool

↓ [Resource impact report](#)

22 September 2017 PDF 396.94 KB

↓ [Resource impact template](#)

22 September 2017 Excel 1.42 MB

#### Guidance into practice

> [About the Into practice guide](#)

> [Using NICE guidance and quality standards to improve practice](#)

#### Baseline assessment

↓ [Baseline assessment tool](#)

22 September 2017 Excel 423.39 KB

#### Shared learning

> [Shared learning information](#)

# Supporting implementation and improvement

NICE - Baseline assessment tool (BAT)

NICE - Quality standard service improvement template (QSSIT)

A	B	C	D	E	F	G																				
Quality standard template: Assessment and action plan				Asses																						
<a href="#">Instructions on use</a>				Initial assessment																						
				How does the current service compare with the statement?	What is the source of evidence to support this?	What are the risks associated with making these improvements? This should be an initial high-level assessment.																				
Ref	Quality standard	Selected statement																								
(i)	QS1 - Dementia																									
(ii)	Select a Quality Standard	<ul style="list-style-type: none"> <li>1 - People with dementia receive care from staff appropriately trained in dementia care</li> <li>2 - People with suspected dementia are referred to a memory assessment service specialising in the</li> <li>3 - People newly diagnosed with dementia and/or their carers receive written and verbal information</li> <li>4 - People with dementia have an assessment and an ongoing personalised care plan, agreed across</li> <li>5 - People with dementia, while they have capacity, have the opportunity to discuss and make decisi</li> <li>6 - Carers of people with dementia are offered an assessment of emotional, psychological and social</li> <li>7 - People with dementia who develop non-cognitive symptoms that cause them significant distress.</li> </ul>																								
				<b>Structure measure</b> Evidence of local arrangements to ensure that people with diabetes are assessed annually for the risk and presence of complications and these are managed appropriately.																						
				<b>Process measure</b> Proportion of people with diabetes who are assessed annually for the risk and presence of complications and these are managed appropriately.																						
				Numerator	The number of people in the denominator receiving an assessment for the risk and presence of complications during the previous 12 months and are managed appropriately.	<table border="1"> <thead> <tr> <th></th> <th>01/04/2012</th> <th>01/04/2013</th> <th>01/04/2014</th> <th>01/04/2015</th> </tr> </thead> <tbody> <tr> <td>Numerator</td> <td>49</td> <td>52</td> <td>60</td> <td>73</td> </tr> <tr> <td>Denominator</td> <td>52</td> <td>60</td> <td>63</td> <td>75</td> </tr> <tr> <td></td> <td>84%</td> <td>87%</td> <td>86%</td> <td>87%</td> </tr> </tbody> </table>		01/04/2012	01/04/2013	01/04/2014	01/04/2015	Numerator	49	52	60	73	Denominator	52	60	63	75		84%	87%	86%	87%
	01/04/2012	01/04/2013	01/04/2014	01/04/2015																						
Numerator	49	52	60	73																						
Denominator	52	60	63	75																						
	84%	87%	86%	87%																						
				Denominator	The number of people with diabetes.																					
				<b>Proportion of people with diabetes who are assessed annually for the risk and presence of complications and these are managed appropriately.</b>																						

- Support initial assessment and an action plan
- Modifiable sheets
- Drop down menu select QS/recommendation

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# NICE quality improvement resource: adult social care

- Brings together NICE quality standards and guidelines in easy to use format, mapped against CQC key lines of enquiry
- Help you find quality statements and managing medicine guideline recommendations
- Inform discussions between local commissioners and providers to improve quality
- Can be adapted for local use (contract specifications, quality dashboards, self-assessment)

NICE Quality Improvement Resource: adult social care					
WELL LED: CQC adult social care services framework - are services well-led?					
W1: Is there a clear vision and credible strategy to deliver high-quality care and support, and promote a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people?		W2: Does the governance framework ensure that responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed?		W3: How are services well-led?	
QS147: Healthy workplaces: improving employee mental and physical health and wellbeing	Statement 1: Employees work in organisations that have a named senior manager who makes employee health and wellbeing a core priority.	<a href="#">Link</a>	SC1: Managing medicines in care homes	Recommendation 1.1.1: Commissioners and providers (organisations that directly provide health or social care services) should review their policies, processes and local governance arrangements, making sure that it is clear who is accountable and responsible for using medicines safely and effectively in care homes.	<a href="#">Link</a> QS30: Deme independent and wellbeir
QS147: Healthy workplaces: improving employee mental and physical health and wellbeing	Statement 2: Employees are managed by people who support their health and wellbeing.	<a href="#">Link</a>	SC1: Managing medicines in care homes	Recommendation 1.5.2: Health and social care practitioners should consider working with all relevant stakeholders to develop a locally agreed action plan, in line with other local and national strategies and governance arrangements, for improving the safety of residents and reducing medication errors in care homes.	<a href="#">Link</a> QS30: Deme independent and wellbeir
QS147: Healthy workplaces: improving employee mental and physical health and wellbeing	Statement 3: Employees are managed by people who are trained to recognise and support them when they are experiencing stress.	<a href="#">Link</a>	SC1: Managing medicines in care homes	Recommendation 1.6.1: Commissioners and providers of health or social care services should all be aware of local arrangements for notifying suspected or confirmed medicines-related safeguarding incidents.	<a href="#">Link</a> QS30: Deme independent and wellbeir
QS147: Healthy workplaces:	Statement 4: Employees have the opportunity to contribute to decision.	<a href="#">Link</a>	SC1: Managing medicines in care	Recommendation 1.6.2: Care home providers should have a clear process for reporting medicines-related safeguarding	<a href="#">Link</a> QS30: Deme independent

# Quick guide – Discussing and planning medicines support



**NICE** National Institute for Health and Care Excellence

## Discussing and planning medicines support

A quick guide for home care managers providing medicines support

**QUICK GUIDE**



*Medicines help maintain health, treat illness, and manage long-term conditions*

Medicines support for adults may be provided by a number of different people, including family, healthcare professionals and home care staff. It is essential to be clear about what support is needed and who will provide it. As far as possible, the person should manage their medicines themselves. Where it has been agreed that medicines support will be provided as part of a home care service, it may be helpful to think about the following areas.

### Discussing medicines support

**Make sure medicines support is considered when assessing a person's needs, consulting with healthcare colleagues if necessary. Talk to the person and (if they agree) their family or carers about what support they need:**

- ✓ What medicines do they use and when?
- ✓ Why do they take these medicines?
- ✓ How do they currently manage and store them?
- ✓ What help do they need?
- ✓ Does their ability to make daily decisions about their medicines change?

**Think about the things that might affect the type, amount, or timing of support the person needs. Make sure it is clear who has responsibility for the medicines. Record the discussion and any decisions made.**

- ✓ Are the medicines tablets, creams, patches, inhalers, eye drops or liquids?
- ✓ Are there any special instructions to follow, or any devices used to help administer the medicines - e.g. an oral syringe or eye drop dispenser?
- ✓ Are any medicines needed at a particular time?
- ✓ Are any medicines taken 'when required'?
- ✓ Do they take any over-the-counter or herbal medicines, or nutritional supplements?



### Who else can help?

To support people to manage their medicines as independently as possible, help may be needed from other professionals - for example, the person who prescribed the medicine, the dispensing pharmacist, or another health professional. They can:

- provide information, advice and support
- check if it is possible to simplify how and when the medicines are taken
- consider if a review might be needed, and if any medicine can be stopped.



### Medicines policy

The medicines support provided should be guided by a medicines policy. As well as information about assessing and supporting people to take their medicines, this could include processes for:

- working together with other health and social care providers
- sharing information about a person's medicines
- keeping accurate and up-to-date records
- managing concerns, including medicines-related safeguarding incidents
- when it may be assessed as necessary to give medicines to people without their knowing
- ordering and supplying medicines
- transporting, storing and disposing of medicines
- training and assessing the competence of staff

### The 6 rights (Rs) of medicines administration provide a helpful prompt:

- 1 Right person
- 2 Right medicine
- 3 Right route
- 4 Right dose
- 5 Right time
- 6 Right to decline

### Planning and reviewing medicines support

If the person requires help with their medicines and this is being provided as part of a home care service, the care worker should only provide the support agreed in the care plan. The medicines support section of a care plan could cover:

#### Care plan

Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

**Needs and wishes**

The support the person requires for each medicine, taking their preferences into account.

**Action**

What the care worker needs to do to give that support

**Consent**

How the care worker will get consent for decisions about medicines

#### Review

Date on which the support provided will be reviewed. An earlier review will be needed if:

- Changes are made to the person's medicines
- Concerns are raised
- The person goes into hospital
- The person experiences a major change in their life

**Medicines administration record (MAR)**

Accurate, up-to-date and accessible details of the support given for each medicine on every occasion it is provided.



### Further information

[Managing medicines for adults receiving social care in the community - NICE guideline](#)

[Fundamental standards - Care Quality Commission](#)

[Community adult social care services: information for providers - Care Quality Commission](#)

[Home care: delivering personal care and practical support to older people living in their own homes - NICE guideline](#)

[The handling of medicines in social care - Royal Pharmaceutical Society](#)

This content has been co-produced by NICE and SCIE and is based on NICE's guideline on managing medicines for adults receiving social care in the community.

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Social Care Institute for Excellence  
www.scie.org.uk

# Social care trainers resource



**Quick links – popular topics**

The table includes examples of NICE guidance, grouped by popular training topics.

Visit [www.nice.org.uk/about/nice-communities/social-care](https://www.nice.org.uk/about/nice-communities/social-care) to find the PDF of this resource and use the hyperlinks to take you straight to the recommendations or statements.

Training topic	Example of relevant guidance
Work in a person-centred way	<ul style="list-style-type: none"><li>• Adult social care: improving people's experience (guideline NG88)</li><li>• Older people: independence &amp; mental wellbeing (guideline NG32, quality standard QS137 &amp; QS50)</li></ul>
Privacy & dignity	<ul style="list-style-type: none"><li>• Adult social care: improving people's experience (guideline NG88)</li><li>• Decision making &amp; mental capacity (guideline May 2018)</li></ul>
Fluids & nutrition	<ul style="list-style-type: none"><li>• Nutrition support for adults (guideline CG32, quality standard QS24)</li></ul>
Dementia	<ul style="list-style-type: none"><li>• Dementia: supporting people with dementia and their carers in health &amp; social care (guideline CG42)</li><li>• Delirium (guideline CG103, quality standard QS63)</li></ul>
Learning disability	<ul style="list-style-type: none"><li>• Learning disabilities &amp; behaviour that challenges: service design &amp; delivery (guideline Mar 2018)</li><li>• Care &amp; support of older people with learning disabilities (guideline Apr 2018)</li><li>• Mental health problems in people with learning disabilities (guideline NG24, quality standard QS142)</li><li>• Challenging behaviour &amp; learning disabilities (guideline NG11, quality standard QS101)</li></ul>
Autism	<ul style="list-style-type: none"><li>• Autism spectrum disorder in adults (guideline CG142)</li><li>• Autism (quality standard QS51)</li><li>• Autism spectrum disorder in under 19s (guideline CG178)</li></ul>
Safeguarding	<ul style="list-style-type: none"><li>• Domestic violence &amp; abuse (guideline PH50, quality standard QS116)</li><li>• Home care (guideline NG21)</li><li>• Child abuse &amp; neglect (guideline NG76)</li><li>• Harmful sexual behaviour among children &amp; young people (guideline NG55)</li><li>• Looked-after children &amp; young people (guideline PH26, quality standard QS31)</li><li>• Managing medicines in care homes (guideline SC1, quality standard QS83)</li><li>• Managing medicines for adults receiving social care in the community (guideline NG27)</li><li>• Oral health for adults in care homes (guideline NG48, quality standard QS151)</li><li>• Pressure ulcers (guideline CG179, quality standard QS89)</li></ul>
Medicines management / health related activity	<ul style="list-style-type: none"><li>• Workplace health: management practices (guideline NG13, quality standard QS147)</li><li>• Healthcare-associated infections: prevention &amp; control in primary &amp; community care (guideline CG129, quality standard QS61)</li></ul>
Healthy workplaces	
Infection prevention & control	

Help to find content for use in your training. This resource includes:

- links to social care related guidance and standards
- free resources to download
- tips on finding guidance

# Shared learning case studies

2018 winner, East Berkshire CCG and Oxford Academic Health Science Network



“

Regardless of their role, everyone can play a part in implementing NICE guidelines to improve safety and quality of care for older people.

2018 winner Sundus Jawad - Prescribing and Care Homes Support Pharmacist, East Berkshire CCG

”

## Using NICE guidance or quality standards to improve services?

Share your experiences and you could win the NICE Shared Learning Award

### Submit an example



Tell us how you've made improvements in your organisation.

- Share best practice.
- Showcase innovation.
- Get shortlisted for the annual NICE Shared Learning Awards.

### Find a case study



Ideal if you're responsible for making changes to service delivery.

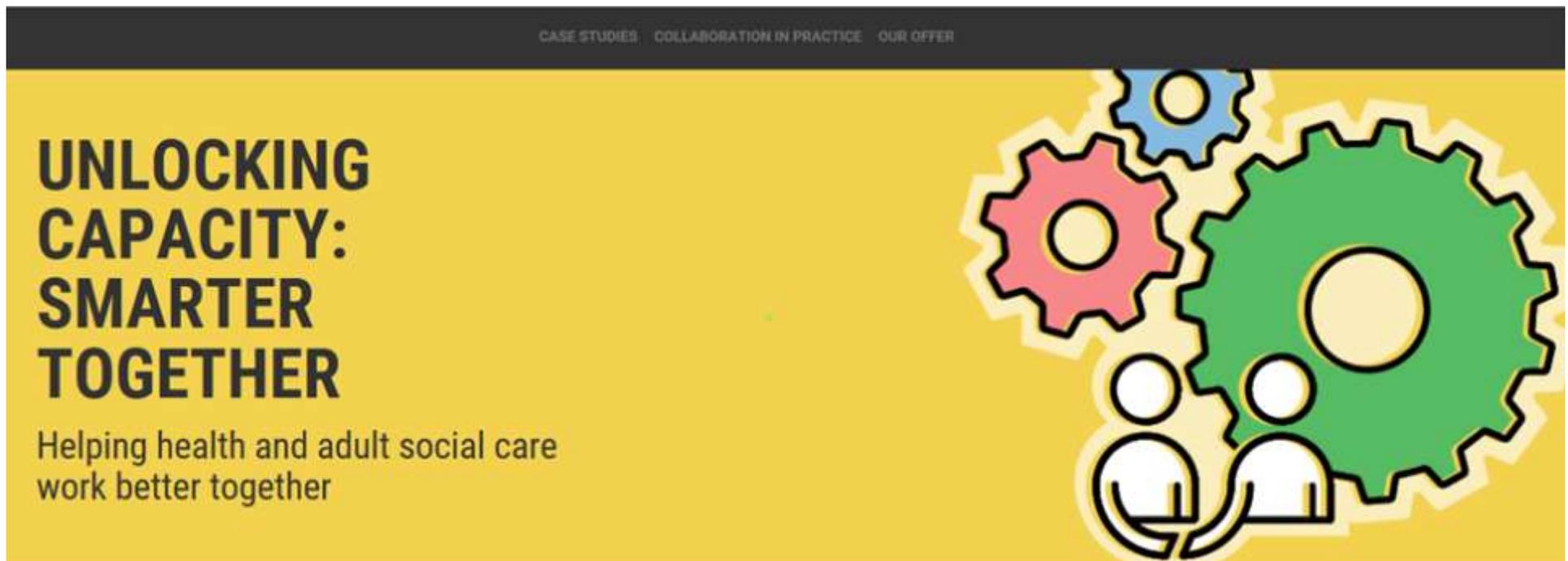
Includes examples of using our guidance and standards in:

- Quality improvement.
- Integration of services.
- Efficiency changes.

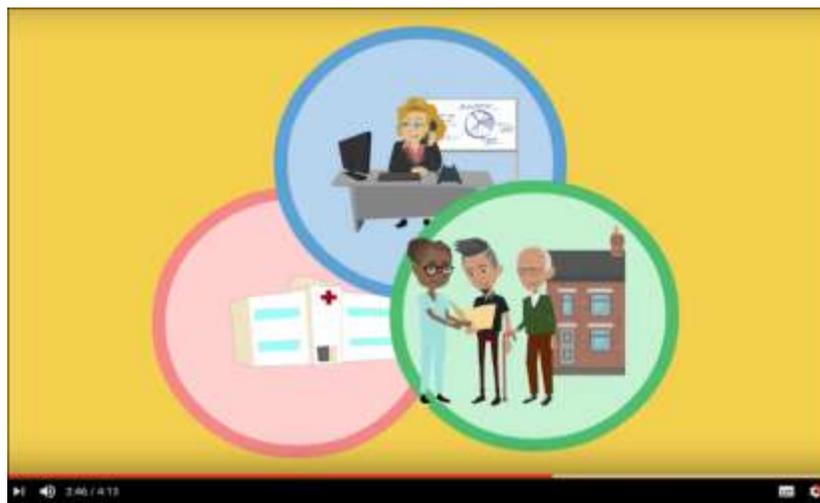
# Unlocking capacity: smarter together – new resource

Digital resource **for local system leaders**, developed by Quality Matters priority 5 partners

Designed to **inspire and support** local areas to take the next step in their journey of collaborative working.



# Navigating adult social care – animation



# 7 local case studies



## Manchester: People before organisations

Strategy based around people and place, including extra care housing.



## Frimley: Work without boundaries

Integrated community support and a cross-sector leadership programme.



## Isle of Wight: Catalyst for collaboration

Integrated commissioning and quality teams and strong collaboration with care providers.



## Nottingham and Nottinghamshire: Homes, health and wellbeing

Collaboration with housing and the evidence behind integrated teams.



## Dudley: A health, social care and community ecosystem

Social prescribing, community assets and prevention as a priority.



## Surrey: Evolution through collaboration

Market events with home care providers and a joint care workforce strategy.



## Lincolnshire: Steps to success

The process of collaboration and 'de-prescribing of common medicines in care homes' as an example.

# High level steps to support collaboration

9 steps for collaborative working

Based on our case studies

Can be applied on a big or a small scale

**Use this resource in your local area** to inspire action and to take your next step



**COLLABORATION IN PRACTICE**

High level steps that support collaborative working on a big or small scale.



**Are you on board with the benefits of collaboration? If so, what is the next step in your journey?**

**Collaborative working in practice – the 'how'**

These steps aren't revolutionary, they probably won't cover anything you don't know. But as collaborative working is easier as a concept and much harder to put into practice, we thought it was important to include a basic framework for action. This is based on the experience of our case example areas.

These steps are scalable, from senior executives across sectors working on whole system strategy, to team leaders across health and social care making changes to a particular support pathway.



<http://qualitymatters.nice.org.uk/unlocking-capacity-smarter-together/index.html>

# Resources for STPs/ICSSs

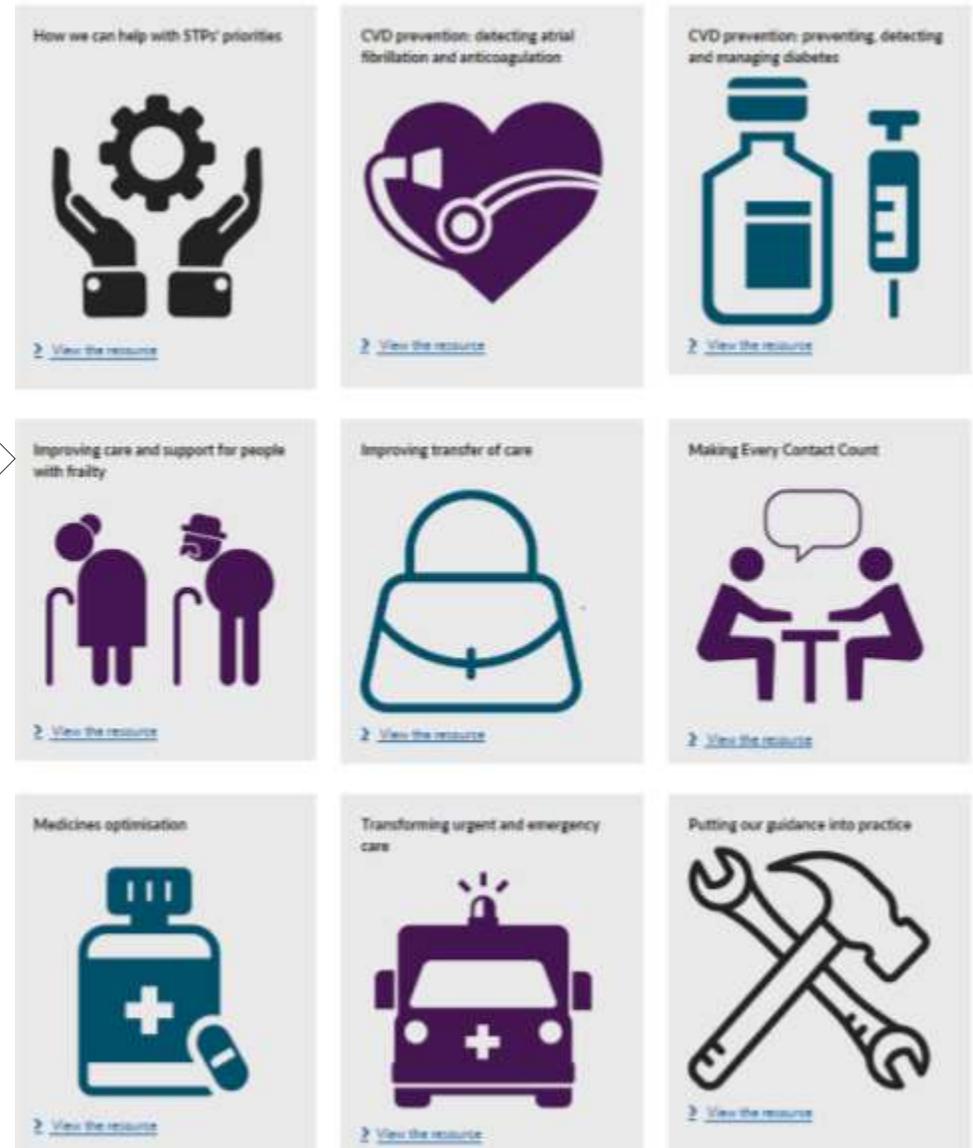
Our resources are designed to help systems work in partnership to provide consistent, high quality care, based on the best evidence.

## Frailty resource

This resource helps identify the relevant guidance, standards and tools developed by NICE to improve quality of care including:

- Case for change
- Definition
- Relevant guidance and how to find it
- Relevant standards and how to use them
- Tools and resources to support

**NICE** implementation [www.nice.org.uk/about/what-we-do/sustainability-and-transformation/resources-for-stps-and-icss](https://www.nice.org.uk/about/what-we-do/sustainability-and-transformation/resources-for-stps-and-icss)



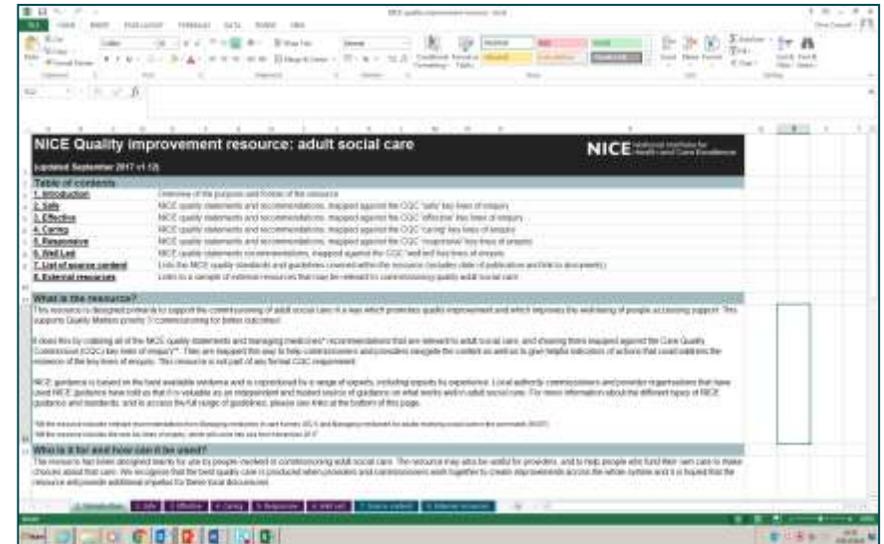
# NICE quality improvement resource

Brings together NICE quality standards and guidelines in an easy to use format, mapped against CQC key lines of enquiry

An independent source of guidance on practical ways to improve

Co-produced (including CQC)

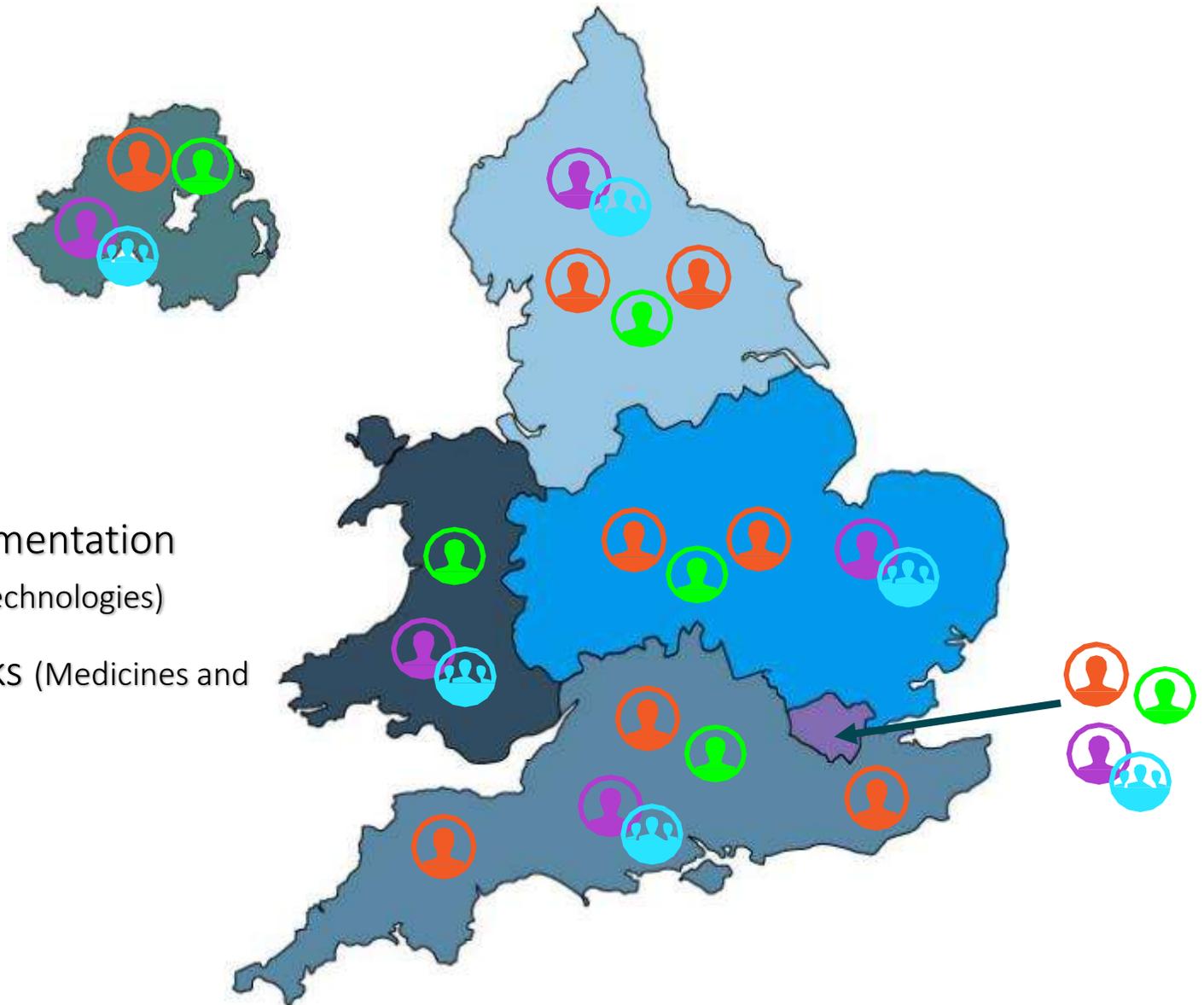
<https://www.nice.org.uk/about/nice-communities/social-care/quality-improvement-resource>



# NICE regional and local support

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-  Field Team
-  NICE Fellows and Scholars
-  Regional Medicines Implementation Consultants (Medicines and Technologies)
-  Associate/affiliate networks (Medicines and Technologies)



# Staying up to date

- Website [www.nice.org.uk](http://www.nice.org.uk)
- [NICE News](#) - monthly e-newsletter
- [NICE in social care](#) – monthly bulletin
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## Featured news



[Therapy offered within one month to prevent PTSD, says NICE](#)

People who have suffered trauma and are at risk of post-traumatic stress disorder (PTSD) should be offered therapy within one month, NICE says in new draft guidance. [More...](#)



[Life-extending lung cancer drug will be more widely available on the NHS after NICE review](#)

NICE says more people should be able to freely access pembrolizumab, known as Keytruda, after a new trial shows it helps certain adults with lung cancer live more than a year longer. [More...](#)

## News



[People with dementia should be involved in discussions about their care, says NICE](#)

NICE has updated its guidance for the support of people living with dementia. [More...](#)



[The impact of NICE on cardiovascular disease \(CVD\) prevention \(PDF\)](#)

Around 7 million people in the UK are affected by cardiovascular disease (CVD). This impact report considers how NICE guidance contributes to the prevention of CVD. [PDF...](#)

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## Blog



[Improving access to new treatments in rare diseases](#)

Emily Crossley, co-founder and co-chief executive of Duchenne UK tells



[Have you read my notes, doctor?](#)

Dr Deyo Okubadejo, consultant in medicine for older people, North West

# Give thought to...

What good practice have you got in your organisation around NICE?

What opportunities have you identified today to use NICE to ensure quality and for quality improvement?

What can you do to get these messages across in your organisations?

What can NICE do to help you?

