

Developing service delivery guidelines on acute medical emergencies: challenges and solutions

Authors: Jennifer Hill^A and NICE acute medical emergencies guideline committee

Aims

To develop a National Institute for Health and Care Excellence (NICE) guideline for the NHS on service delivery and organisation of care for emergency and acute medical care in over 16s.

Methods

The NHS is challenged by an ageing population and finite resources. Hospitals are approaching full capacity and the flow of patients through the system is compromised by various factors. NICE commissioned the National Guideline Centre (NGC) based at the Royal College of Physicians to develop a guideline on acute medical emergencies. This was unusual as it was one of the first NICE guidelines purely focused on service delivery. Clinical questions on acute care have been covered by many other previous NICE guidelines. It was also probably the largest guideline that NICE has commissioned, approximately three times the size of a standard NICE guideline.

The guideline aimed to produce evidence-based recommendations on the delivery of care for patients with acute medical emergencies in England. There was an acknowledgement from the outset that it was important to look at the whole pathway of patient care from initial contact with healthcare through to discharge from hospital and beyond. The challenge was twofold: to produce a service guideline applicable to the UK context using global evidence and to produce a guideline much bigger than a standard guideline.

Standard NICE methodology was followed but several adaptations to processes were needed. A guideline committee was convened to work alongside the technical team at the NGC. Work was needed to determine which key issues were most important and what evidence should be included in terms of applicability to the UK context. We also needed to be mindful of policy developments in this fast-moving political area.

Results

We found that we needed to work with our stakeholders and committee members in new ways and particularly make decisions about the applicability of evidence to the UK context.

Conclusion

From this experience, the NGC developed new ways of working efficiently to develop very large guidelines and methods for working on service delivery topics, particularly in relation to keeping the evidence applicable to the national political context. ■

Conflict of interest statement

The author has no conflicts of interest. The guideline committee declared conflicts of interest throughout development of the guideline and these are listed on the NICE website: www.nice.org.uk/guidance/gid-cgwave0734/documents/list-of-declarations-of-interest.

Authors: ^ANational Guideline Centre, Royal College of Physicians, London, UK