

NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE

NHS Evidence

Briefing Document

October [8], 2008

Contents

Introduction and background.....	2
Expected benefits.....	3
Blueprint for the service	4
Roll-out plan	7

Introduction and background

Purpose of this document

This document provides:

- a summary of the key principles underpinning NHS Evidence
- an overview of what the service will offer in terms of content and what it can do ('functionality')
- an outline of the key benefits that users can expect to receive once the service launches in April 2009.

The primary focus for this document is to present the longer-term vision for NHS Evidence – this has been developed based on feedback captured from a wide range of potential users and other key stakeholders.

Background and context

In the Darzi report, 'High Quality Care for All' (published in June 2008), NICE was asked to establish NHS Evidence, which is expected to be a key component in the drive to improve quality of care across the NHS. The report stated that:

NICE will manage the synthesis and spread of knowledge through NHS Evidence – a new single portal through which anyone will be able to access clinical and non-clinical evidence and best practice, both what high quality care looks like and how to deliver it. Greater clarity on standards, and where to find them, will support the commissioning and uptake of the most clinically and cost-effective diagnostics, treatments and procedures.

NHS Evidence will incorporate some of the key components from the National Library for Health, with the objective of enhancing the functionality and content currently offered through this service.

What is 'NHS Evidence'?

NHS Evidence is first and foremost a service which will help people from across the NHS and working in the wider public health sector to find, access and use clinical and non-clinical evidence and other information of the highest quality. It will do this by engaging directly with healthcare and other professionals to identify, accredit and disseminate information on best practice, overseen by an independent Advisory Board.

The service will draw on a comprehensive range of information sources (including local experience), providing easy access to information that has traditionally been hard to find. Different types of information will be brought together in an integrated portal that will be accessible through a dedicated NHS Evidence website and also available via IT systems used in clinical decision-making. Information will be presented in a way that can be customised by users to meet their specific needs.

Initially the focus will be the NHS, and it that audience that is primarily considered in the rest of this paper.

NHS Evidence should be the 'first point of contact' for NHS staff to access evidence and related information – this includes both sources of research evidence and information on local experience (for example, evidence-based protocols). The system will be built around a powerful search engine, although users will also be able to browse evidence using 'topic trees', and upload and share their own content (such as local service models and policies). Users will also be able to customise the service based on their own preferences – for example, to access evidence that is tailored to their needs, and to receive alerts about new information.

Expected benefits

NHS Evidence will be designed to meet the needs of users from across the NHS, including (but not restricted to) clinicians, nurses, pharmacists and commissioners. The service will be built on an 'open-access principle' – as much content and functionality as possible will be available without the need to log on to the portal. Access to some full-text content will require users to log on because of commercial

arrangements with the information providers, although this will be kept to a minimum and the log-on process will be as simple as possible. Patients and the wider public will be able to search NHS Evidence and access content (commercial arrangements permitting). NHS Evidence will also work closely with patient-focused portals such as NHS Choices and NHS Direct to ensure seamless access to content where available.

NHS Evidence will provide two main benefits for users:

- **Easy access** to information that has previously been difficult to find.
- Identification of those sources that represent **best practice**.

On a practical level, this will be supported by the following components:

- Powerful, easy-to-use online search facility.
- Search results presented in a way that is easy to interpret.
- Pointers to the best quality content, based on a transparent accreditation scheme.
- Comprehensive range of resources (including new sources of information).
- Easy access through a range of IT systems (such as existing systems used by clinicians and other users across the NHS) and devices (such as mobile phones and PDAs).
- Opportunities to engage in the process for developing the service.

Blueprint for the service

Key principles

NHS Evidence has a clear scope and objective. It is important that the service does not seek to be 'everything to everyone'. NHS Evidence will be built around a set of clearly defined core principles that will ensure:

- Clinical and professional networks are involved at all stages of the process, so that the service is recognised as more than just a website – 'for professionals by professionals'
- Comprehensive access to a variety of different information sources
- Access is as straightforward and easy to use as popular internet search engines such as Google, with results prioritised to meet user requirements
- Key sources of information are highlighted as 'trusted sources' through an independent accreditation process, which will also identify standards for best practice

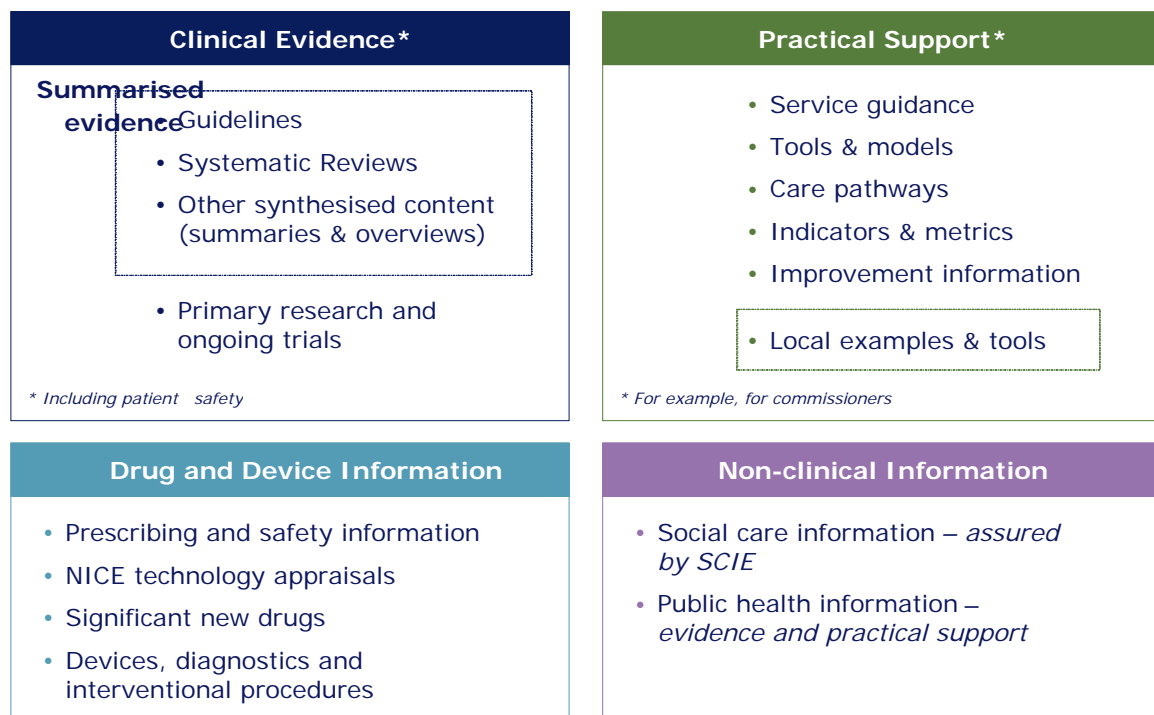
- Access to primary research, including published and ongoing clinical trials
- The service is designed around the needs of NHS staff and other relevant professionals, but will be publicly available wherever possible.

NHS Evidence will not generate new content (such as reviews or evidence summaries): its aim will be to be a point of easy access to high quality information.

Categories and sources of information

NHS Evidence will consolidate information from a wide range of sources in one central portal, with a common point of access. The service will provide easy access to information that has traditionally been difficult to find, or available only by searching a variety of different sources, such as drug approval status. Furthermore, information included in the portal will not be limited to research evidence – the service will also aim to provide users with access to tools (such as service models and local policies) that they can use to apply the evidence in their day-to day work.

NHS Evidence will provide access to information across a number of categories, as outlined in the diagram below. Where possible, the information will be embedded into the NHS Evidence system (so that content is available through the search engine). However, in the short term it may be necessary to add links to some information sources (such as external websites).



NHS Evidence will draw on national, international and local sources of evidence and related information. In addition to collections of evidence (such as that included in bibliographic databases), NHS Evidence will access content from a variety of other 'primary' sources, including Arms Length Bodies. At launch, the service will incorporate all of the sources currently included in the National Library for Health, plus some additional sources. More sources will be added over time.

NHS Evidence will be built around a powerful search engine that will access content from across the different sources. The relevance and prioritisation of search results depending on the user's requirements will improve over time as the search engine 'learns', and as national standards for information are developed. NHS Evidence is expected to provide the necessary mandate to drive the adoption of these national standards.

Accreditation scheme

The key aim of the NHS Evidence accreditation scheme will be to identify trusted sources of information and set standards of best practice. The accreditation scheme will highlight sources that can be considered to be high quality, although users will also be able to assess other non-accredited content if they wish. Evidence sources will be accredited based on the process they use to generate the evidence.

The overall accreditation scheme will be built on the following key principles:

- **Transparent**, with standardised criteria and processes.
- **Unbiased** – overseen by an independent Advisory Board.
- Focused on '**synthesised**' sources of evidence (for example, meta-analyses or systematic reviews).
- Based on the **process** used to develop the evidence.
- **Sources**, rather than individual articles, will be accredited.
- The award of a kite-mark' that will become **well known** and recognised.

Functionality

The NHS Evidence portal will offer users a range of functionalities, as summarised in the 'What's in' column of the table below. It is important that the service remains focused on its core remit, and doesn't duplicate functionality currently offered through other websites or portals (such as NHS Choices).

What's in ...	What's out ...
<ul style="list-style-type: none"> • Powerful search facility – as simple as Google • Categorised and prioritised content • Opportunity to set up a personalised homepage • An alert system to highlight key new information • Integration into NHS and third-party IT systems • Complex searching for specialist researchers 	<ul style="list-style-type: none"> • Dedicated Q&A service • 'Wiki' for medical knowledge • Internet searching for content (such as blogs and video clips) that has not been quality-assured • Discussion board (this is covered by the Connecting for Health programme) • Dialogue service with patients/public (this is covered by NHS Choices)

Roll-out plan

Launching NHS Evidence

NHS Evidence will aim to provide as broad a range of functionality and content as possible in the launch version in April 2009. This is expected to include the following key components:

- A fast, comprehensive search function for clinical and non-clinical information
- Access to a resource that collates information on new drugs to support commissioners
- A new NHS Evidence homepage that users can personalise.

Additional functionality and content will be added in future versions of NHS Evidence, once the systems for clinical engagement have been implemented and the vast range of information sources have been organised and sorted. Where functionality cannot be included at launch, 'coming soon' demos will be used to illustrate for users what they can expect to see in future versions of the service, and when.

User engagement

It is very important that NHS Evidence meets the real needs of its users. The blueprint for the service (as outlined in this document) has been developed based on interviews and focus groups with key user groups (such as clinicians, commissioners and service managers). Continued active engagement with users will be critical as the launch approaches and the detailed specifications and design are finalised. Ongoing user consultation sessions are being scheduled for this purpose.

Regular user consultation will continue once NHS Evidence has launched in April 2009 to ensure that future versions of the service continue to reflect the needs of end-users.

For further information on user consultation, please contact:
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