NICE SCHOLARSHIP PROGRAMME
PROJECT SUGGESTIONS

Introduction

You are required to make a proposal as to how you will spend your time as a scholar. The purpose of this document is to provide some suggested areas in which NICE would be keen to receive applications. This is not intended as an exhaustive list of projects that will be accepted by the selection panel but they will look favourably on proposals in these areas. NICE encourages you to propose a project which is in line with your expertise and interests and will contribute to increased quality of care. You should be realistic as to what is achievable within the 12 month time frame, with approximately 7.5 hours per week dedicated to the scholarship project.

Guidance

Scholarships are open to a wide range of individuals from across health, public health and social care and therefore many types of project will be suitable. You may find it useful to look at the types of projects previous scholars have carried out (scholars).

Before making a scholarship proposal, you should establish that:

- The project is feasible and methodologically robust
- All ethics and governance issues have been identified, including any local arrangements
- It can be completed within the 1 year period of your scholarship
- You have the necessary support of your employing organisation.

Examples

1. Implementation of guidance

NICE guidance delivers no benefit if it is not implemented. A proposal may be to implement one or more pieces of guidance.

Support and resources to help make the most of NICE guidance and quality standards can be found here: [http://www.nice.org.uk/About/What-we-do/Into-practice](http://www.nice.org.uk/About/What-we-do/Into-practice)

NICE endorses tools to support the implementation of NICE guidance. More information can be found here: [https://www.nice.org.uk/about/what-we-do/into-practice/endorsement](https://www.nice.org.uk/about/what-we-do/into-practice/endorsement)
A NICE project could involve reviewing aspects of care in your local area against metrics defined by NICE guidance. This could be via an audit.

2. Use of core outcomes in existing NICE guidelines

The guidelines team are keen to work with a scholar to look at the use of core outcomes within existing NICE guidelines.

They want to explore in clinical guidelines published from 2014 onwards:

- In evidence reviews, which reviews had searched for published core outcome sets (COS), and how they were used
- In evidence reviews, where core outcome sets were searched for the reviews, what is the proportion that published COS actually exist
- In evidence reviews, where outcomes were chosen by the Committee, what is the proportion of overlaps between committee chose outcomes and existing COS
- If capacity allowed, they would also like to conduct an online survey to explore with current/previous committee members about their awareness of COS in their area, and their views of its utility.

They want to find out where COS wasn’t used to explore was it because:

- Guideline/committee not aware of it?
- Committee didn’t think the published COS is appropriate?
- And where the committee had chosen the outcomes based on their expert knowledge, what is the proportion of overlaps between committee chose outcomes and existing COS?

The guidelines team would provide support to a scholars working in this area.

3. Implementation of Quality Standards (QS)

A project for a scholar could be to take a QS and get it used in practice locally. If it’s from the published topics in the library the team could chat to you about how it was developed and could be used, or if it was for a topic in development they could show you through the process. There could be an opportunity to work with the NICE team to engage with some of the national stakeholders on board for the different topics.

Published topics are here: https://www.nice.org.uk/guidance/published?type=qs

Topics that that are likely to be active around the end of 18/19 when scholars are starting include:

- Lyme Disease
- Hearing loss
- Abdominal aortic aneurysm
- Suspected neurological conditions
- VTE
- Maternal Health
- Coexisting severe mental illness and substance misuse: community health and social care services
- Cerebral palsy in adults
- Suicide prevention
- Depression
- Lung cancer
- Intrapartum care

4. Science Policy and Research

NICE has an active science policy and research programme, which provides leadership and co-ordination for our research and development needs.

The team have a number of ongoing or planned research projects such as:
- Developing methods for capturing patient preferences
- Developing new methods for analysing non-randomised data
- Identification and prioritisation of core outcomes in different conditions
- Identification of appropriate instruments for measuring relevant outcomes in the early stages of Alzheimer’s disease and dementia

NICE is interested in receiving applications in these areas.

NICE is also interested in applications focusing on opportunities and challenges of using observational data, especially data linkage, use of shared records etc.

5. Interventional Procedures Programme

NICE would be keen to receive applications looking at intelligence on implementation of interventional procedures (IP) guidance and measuring the use of IP guidance.

6. Medicines and Technologies

NICE is considering how our content should be developed and presented in the future, and the opportunities working with digital technology. We are looking at the benefits and implications of creating our content in structured form, enabling presentation to users in a layered format (for example, click through from recommendations to evidence) and use by other digital systems. A project supporting NICE with structured content would be valued.
7. Uptake and adoption of medical technologies and diagnostics

- Sustainability: NICE has a focus on sustainability as part of our duty of care to patients and the public, now and in the future. We are committed to exploring the assessment of the environmental impact of our guidance. Projects that look at this aspect of our work would be welcome.

- Digital: Technology has a major role to play in the delivery of safe, efficient health and social care. We would welcome projects that employ digital solutions in the implementation or presentation of NICE guidance.

8. Public Involvement

NICE are interested in the role of evidence generated by and about patients and the public. For example, experience-based data and qualitative research.

NICE are interested in a project that looks at online communities and their contributions to evidence, policy and guidance.

A scholar may want to pick a familiar subject area and look at the patient contribution to the local implementation of NICE guidance on this subject.

NICE produce quick guides for social care:

https://www.nice.org.uk/about/nice-communities/social-care/quick-guides

A project might look at recently published quick guides aimed at users and carers or the user experience.

9. How NICE guidance is written

NICE are always looking for ways to improve the way guidance is presented. In surveys and interviews, people who use NICE guidance tell us that they would like it to be more concise and clearly written. NICE would be interested in a proposal to find out how people read and use guidance in practice, how NICE might improve the way that it is presented and to test some different approaches to the format of recommendations. This will help NICE identify ways to make guidance as relevant, clear and easy to use as possible.

10. Shared decision making

NICE is keen to ensure guidelines highlight preference sensitive decision points, and make sure that they are framed in a way that can be used. A project looking at shared decision making (SDM) would be welcome, particularly how risk is communicated.