

## **Consultation response from the National Heart Forum**

**Consultation:** Operating model for the  
NICE centre for public  
health excellence

**Consulting body:** NICE

**Date:** June 2005

## **Consultation response from the National Heart Forum on the operating model for the NICE centre for public health excellence.**

### **About the National Heart Forum**

The National Heart Forum is the leading UK alliance of 48 national organisations working to reduce the risk of coronary heart disease and related conditions in the UK. Member organisations represent the medical and health services, professional bodies, consumer groups and voluntary organisations. Members also include many individual experts in cardiovascular disease research. Government departments have observer status. Further details can be found at [www.heartforum.org.uk](http://www.heartforum.org.uk).

The views expressed in this submission do not necessarily reflect the opinions of individual members of the alliance.

### **General comments**

1. The NHF welcome the opportunity to comment and congratulate NICE on the high quality of the public consultation document.
2. The NHF welcomes the development of the public health role of NICE and the acknowledged authority this gives to national public health guidance.
3. The NHF is particularly pleased to note that NICE will be producing programme guidance as well as intervention guidance as effective public health measures require a combination of individual and population level social change interventions.
4. The NHF welcome NICE's adoption of a more broadly defined public health workforce and the need for wider dissemination of guidance to this workforce. But we note that achieving this aim will present both a significant challenge and opportunity.
5. The NHF is very concerned that as a consequence of the merger with the HDA the level of resources allocated to NICE to undertake its public health role has decreased. We find this particularly surprising given the Choosing Health white paper commitments which specified an increase in NICE resources. Any decrease is also contrary to the recommendation for public health investment set out in the Treasury's Wanless review (2004). The NICE budget is a minute investment in the totality of the enormous public investment in the NHS and yet is one of the few organisations that have a whole system impact on improving performance and health outcomes.

### **Specific comments on individual sections**

#### **1. The function of the Centre for Public Health Excellence**

The production of evidence and guidance are essential components to improve the quality of public health investment and outcomes, but they are not sufficient on their own. The NHF would like NICE or the Centre for Public

Health charged with the role and responsibility and resources to facilitate the translation of evidence and guidance into practice. This is especially important given the demise of the HDA and HEA as elements of their work in this regard have not been taken forward following national and regional level organisational changes.

The NHF appreciates that a development role may be a feature of NICE's future strategy, so in the short term it is essential that good working relationships be developed with a range of key organisations who can undertake those key development roles necessary to support the implementation of NICE guidance. These organisations should include the new NHS Institute of Innovation and Learning and the IDeA to enable them to provide public health development programmes; as well as health professional organisations and voluntary sector public health organisations such as the National Heart Forum itself and its members who already produce professional guidance, information and training programmes and qualifications.

Substantial links with the Health Care Commission, Audit Commission, National Audit Office in guiding their reviews, advice and evaluations of health organisations, Local Authorities and Government Departments and will also be a powerful lever in analysis and persuasion.

There are clear issues of workforce development in public health, which are currently receiving quite radical attention. It is important that the Centre for Public Health Excellence engages actively with this process from its perspective of advocating effective public health interventions; these interventions will have implications affecting the target competencies of the workforce.

## **2. Developing the guidance**

### **a. Form of guidance**

The NHF believes it is important to take account of the social population level change nature of the public health evidence base which is very different from NICE's previous work.

The NHF is pleased to note that NICE acknowledges the need to develop methods for and skills in economic analysis of public health interventions and practice strategies.

The NHF would like to see NICE taking a greater involvement in advising the Department of Health, other government departments and their agencies such as the Food Standards Agency, MRC, ESRC and others on the public health research agenda with respect to intervention based research. Enabling scarce resources to be more effectively managed.

The NHF would like to see NICE include a focus in its reviews of direct and indirect environmental interventions in respect of public health.

The NHF would like NICE to provide, with the necessary caveats, more expert opinion and judgement in the assessments of interventions that have some evidence for a high probability of success but do not necessarily reach the threshold achieved by prospective randomised trials. Flexibility is required as social change public health interventions at a population level are not always replicable (nor is it always desirable) and will alter over time, and may differ in effect by social context. Precise interventions cannot necessarily be recommended (or withdrawn) in the way that clinical personal treatments can. In public health we are often talking about contextual plausibility not a general biological effect. In some of these instances the guidance will need to be about the process of social change free from the illusion that a magic public health bullet exists. In public health these are rare. . These assessments should also refer to, and interact with, the emerging research agenda.

Given the Governments stated commitment to reducing health inequalities the NHF would like to see greater and more public mention of the need to focus on interventions to reduce health inequalities throughout the work of the Centre for Public Health excellence.

Many effective public health interventions should be undertaken at both a national and international level. We therefore urge that NICE be allowed the objective and transparent freedom to make public recommendations for action at these levels. These freedoms already exist at the Food Standards Agency and their experience in this regard can be usefully drawn upon. This role is particularly important given that England does not have an independent national public health institute.

The NHF would like NICE to consider producing or facilitating reputable others to produce preliminary guidance with caveats ahead of full review guidance when there is an absence of such guidance for a national priority area. One current example is the absence of authoritative guidance on obesity prevention until 2007.

#### **b. The Phorum- The Public Health Forum**

The NHF very much supports the continuance and further development of this forum which is an established and key stakeholder resource for NICE and very well regarded by the wider voluntary sector in championing public health engagement.

#### **3. Topics.**

The NHF supports the topics chosen but considers it important to evaluate the contribution of nutrition and physical activity more widely than just within the context of obesity.

***Finally the NHF looks forward to working closely with NICE in the development of public health.***