1. **Purpose of this strategic plan**

The appraisal and synthesis of clinical and health research evidence has a well-established role in supporting policy development and the delivery of health care. In view of the specialist skills required to undertake these activities, it is appropriate that the production of evidence-based advice relevant across health and social care services is undertaken once for Scotland by a national organisation and duplication of effort is avoided.

Evidence-based outputs include clinical guidelines, health technology assessments and clinical standards aimed at practitioners and policy makers at both local and national level. A range of factors needs to be considered in respect of effective implementation of evidence-based advice in policy or practice. These include the central role of patients or service users in decision-making about their treatment, and the need for advice to be timely and responsive in the increasingly dynamic care environment. There are known to be many challenges in supporting effective uptake and implementation of advice in the health service and the integration of health and social care adds a further level of complexity.

This strategic plan outlines how the work, working arrangements and outputs of the Evidence Directorate will be developed to support patients, service users, clinicians, other health professionals and social care practitioners, as well as other teams in Healthcare Improvement Scotland to ensure we are maximising our resources to support the delivery of high quality care.

2. **Role of directorate**

The Evidence Directorate serves a dual role in Healthcare Improvement Scotland. We develop and disseminate evidence-based advice for NHSScotland, such as clinical guidelines, health technology assessments and clinical standards, and we provide internal evidence development, research, health economics and knowledge support for the other functions of the organisation. The appendix provides an outline of the current directorate infrastructure.

Much of the work undertaken by the directorate can be classified as research, mainly secondary research, identifying and synthesising existing research studies. The directorate has a track record of participating in and delivering high quality international research such as the Scottish Intercollegiate Guidelines Network (SIGN) work on the EU funded DECIDE project [www.decide-collaboration.eu](http://www.decide-collaboration.eu/). This project resulted in the transformation of the development of information booklets for patients and carers to be significantly more relevant to their needs. The Evidence Directorate also leads the development and implementation of the [Healthcare Improvement Scotland Research Strategic Plan 2016-2020](http://www.healthcareimprovementscotland.org/previous_resources/policy_and_strategy/research_strategic_plan.aspx). Methodological research to address the translational gap between synthesised research, for example guidelines and health technology assessment (HTA) and implementation, is of considerable importance to the achievement of improvement in care quality and this is captured in the Research Strategic Plan.

The approach to delivering our work has been through collaboration with national experts to identify, develop and share evidence-based advice to professionals working in health and

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1[www.healthcareimprovementscotland.org/previous_resources/policy_and_strategy/research_strategic_plan.aspx](http://www.healthcareimprovementscotland.org/previous_resources/policy_and_strategy/research_strategic_plan.aspx)
social care services across Scotland. The advice developed is provided in a variety of formats to support delivery of safe, effective and cost-effective care, and to provide the public with support for decision-making relating to a wide range of treatments and interventions. The directorate also promotes approaches to generating and using knowledge and learning across the organisation and our work supports other Healthcare Improvement Scotland strategic initiatives, including the 2015-2018 Strategic Plan for Medicines, and the Driving Improvement in Non-Medicine Technologies Strategic Plan 2016-2018.

Healthcare Improvement Scotland’s corporate strategy emphasises the need to integrate our evidence, quality assurance and quality improvement support to work as one organisation to achieve our aim of driving the delivery of world-class, person-centred care. The Evidence Directorate also collaborates with partners in the UK and beyond to advance our approaches to producing and using evidence, and contributes to methodological research activity with international partners.

3. Our strategic aims

We will continue to deliver and develop our core functions of providing evidence-based advice on the effectiveness of interventions through the work of the Scottish Health Technologies Group (SHTG), SIGN and the Scottish Medicines Consortium (SMC) and, through the work of the Scottish Antimicrobial Prescribing Group (SAPG), co-ordinate and deliver a national framework for antimicrobial stewardship to enhance the quality of antimicrobial prescribing and management in Scotland.

The nature of care delivery is changing with the implementation of the integration of health and social care: 2015 Review of Public Health in Scotland, and the publication of A National Clinical Strategy for Scotland. Therefore, as a directorate we wish to respond to these system changes and the imperative from the Chief Medical Officer to support the provision of realistic medicine. The Evidence Directorate must also evolve to ensure its activities remain relevant to the breadth of the work of the organisation. To respond to these developments over the next five years, we will:

- work with NHS boards, Integration Joint Boards and health and social care partnerships to develop high quality, sustainable services resulting from the application of evidence and best practice
- provide responsive advice to services and service users on the effectiveness of medicines, treatments and technologies, from innovation to disinvestment
- respond to the needs of our stakeholders for advice that reflects their requirements both in content, timeliness, reflecting key challenges such as the increase in multimorbidity, and in formats that support implementation, and
- continue to contribute to global knowledge on the generation and use of evidence including approaches to evaluation of improvement programmes, and through our contribution to Healthcare Improvement Scotland’s Research Strategic Plan.

4. Our objectives

To meet these ambitious aims, we have identified the following high level objectives:

Identification of evidence needs

1. Working with colleagues in the Improvement Hub (ihub), identify the requirements for evidence-based advice among NHS boards, Integration Joint Boards and health and social care partnerships and associated localities.

Development of evidence

2. Build on our medicines and non-medicines technology assessment work to better support early assessment and adoption of innovative technologies and disinvestment in ineffective technologies, across health and social care services.

3. Provide evidence-based advice on preventive care, models of service delivery and treatment that address known unwarranted variation in practice to support sustainable service delivery and reduce health inequalities.

4. Support the generation of evidence and learning by developing and implementing the organisational approach to evaluating our programmes of work.

Communication of evidence

5. Support research and innovation in the application of evidence through contributing to national and international initiatives.

6. Provide evidence-based advice in formats that are readily accessible to patients and users of services to support shared decision-making and person-centred care.

Effective and efficient internal working

7. Ensure our staff and other resources are used to best effect by developing our people, operating within a flexible structure and working with colleagues to deliver our corporate strategy.
Appendix 1: Our implementation plan

This plan presents the high level objectives, deliverables and timescales we believe are required to achieve our strategic aims. More detailed implementation plans will be developed by the lead officers and supporting teams to plan our programme of activities and monitor progress.

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<th>No.</th>
<th>Objective</th>
<th>Current activities</th>
<th>Future deliverables</th>
<th>Lead unit/officer</th>
<th>With support from</th>
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| 1   | Working with colleagues in the Improvement Hub (ihub), identify the requirements for evidence-based advice and support among NHS boards, Integration Joint Boards and health and social care partnerships and associated localities. | • The Evidence and Evaluation Improvement Team (EEvIT) has been established to provide a conduit between the ihub and Evidence Directorate.   
• Development of the National Health and Social Care Standards and the pressure ulcer standards has established close working links with the Care Inspectorate.  
• Contribution to the development of a Public Health Evidence Network. | 1.1 A description of our stakeholders and their evidence needs.  
1.2 A review of the evidence needs of the ihub workplan priorities to support improvement and strategic commissioning in topics likely to include primary care, acute care, dementia, end of life and palliative care, and mental health.  
1.3 A prioritised work programme reflecting the breadth of our stakeholder group evidence needs.  
1.4 Delivery of training to a range of health and care professionals to support interpretation and use of evidence we develop. | Director of Evidence | • Knowledge Management Team  
• Standards and Indicators Team  
• EEvIT  
• Health Services Research Team | 2017/18 |
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| 2   | Build on our medicines and non-medicines technology assessment work to better support early assessment and adoption of innovative technologies and disinvestment in ineffective technologies, in health and social care services. | • Work to develop a model that facilitates the systematic and routine consideration and spread of advice and information on non-medicines technologies within each NHS board area in Scotland.  
• Embedding across NHSScotland the approach to the assessment of innovative technologies not yet in routine use in Scotland.  
• Development of an advisory group to implement enhanced patient and public involvement processes within SHTG. | 2.1 Tools to support a distributed model of assessment of innovative technologies.  
2.2 A process to identify and address gaps in current horizon scanning for new technologies and methods to act on results.  
2.3 Established processes for the routine consideration of non-medicines technologies within NHS boards.  
2.4 Support initiatives to implement the recent SHTG recommendations to guide appropriate use and spend on technologies across NHSScotland.  
2.5 Work with our strategic partners to improve professional and public understanding of the relative costs, opportunity costs and benefits that health technologies can offer. | SHTG/SMC | • Knowledge Management Team  
• SIGN  
• Health Services Research Team | 2017/18 |
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| 3   | Provide evidence-based advice on preventive care, models of service delivery and treatment that addresses known unwarranted variation in practice to support sustainable service delivery and reduce health inequalities. | • Implement processes for production of standards which can apply in health and social care settings.  
• Exploration with partners, including the Scottish School of Primary Care, to identify and address evidence needs of an integrated health and social care system. | 3.1 A gap analysis of evidence requirements of integrated health and social care services.  
3.2 Identify, source and present evidence-based advice to support the Effective Care Pathways Programme. | Director of Evidence | • Standards and Indicators Team  
• EEvIT | 2017/18 |
| 4   | Support the generation of evidence and learning by developing and implementing the organisational approach to evaluating our programmes of work. | • The establishment of an organisational outcomes planning and evaluation framework and associated tools and training provides a structure for teams to undertake internal evaluation of their programmes. | 4.1 Examples of application of evaluation frameworks.  
4.2 Embedded use of appropriate internal evaluation methods across all our programmes of work. | Deputy Director of Evidence | • Health Services Research Team  
• EEvIT | Ongoing |
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| 5   | Support research and innovation in the application of evidence by contributing to national and international initiatives. | • Membership of national groups exploring application of technology to support evidence into practice.  
• Membership of national knowledge into practice networks.  
• Leadership role in international organisations, including Guideline International Network and Health Technology Assessment International.  
• Healthcare Improvement Scotland Research Strategic Plan. | 5.1 Staff conducting, presenting and publishing research and hosting research conferences.  
5.2 Contributions to international research activity through existing and new networks.  
5.3 Identifying potential income generation streams to support evidence-generation development work. | Deputy Director of Evidence | • All teams | 2017/18  |
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| 6   | Provide evidence based advice in formats that are readily accessible to patients and users of services and support shared decision making and person-centred care. | - Methodology resultant from DECIDE research project for producing evidence based advice for patients and users of services. | 6.1 Definition of evidence-based advice requirements for GPs for use in shared decision-making with patients.  
6.2 An interactive app or online system to support easy access to evidence based advice for patients and users of services. | SIGN                      | - Health Services Research Team                               | 2017/18  
2018/19 |
| 7   | Ensure our staff and other resources are used to best effect by developing our people, operating within a flexible structure, and working with colleagues to deliver our corporate strategy. | - Establishment of knowledge brokers embedded in other directorates and EEvIT.     | 7.1 Our staff skill base and future skills requirements are defined.  
7.2 Staff are deployed to projects based on skills and experience.  
7.2 Management tools to deploy staff appropriately.  
7.3 Established external relationships to access skills not available in-house. | Director of Evidence       | - All teams                                                | Ongoing               |
Appendix 2: Directorate infrastructure

Evidence and Evaluation Improvement Team (EEvIT)

This group comprises staff from a number of teams across the directorate and wider organisation who have a specific remit to support the work of the ihub.

EEvIT provides analytical support for improvement work across the ihub. EEvIT includes experts in knowledge and information retrieval, health services research, health economics, data analysis and evaluation, drawn from across the Evidence Directorate. The team can help design and deliver improvement programmes and projects that are based on current evidence and incorporate approaches to monitoring and measuring their success.

Health Economics Team

The Health Economics Team provides support for the outputs of the SHTG, SIGN and SMC, to ensure that the cost effectiveness of NHS resource use is integral to the advice Healthcare Improvement Scotland issues. In addition, the team regularly contributes health economic analyses to other organisational work programme areas as well as providing health economics advice to several national committees.

Health Services Research Team

The Health Services Research Team supports the Scottish Health Technologies Group through production of rapid evidence reviews, systematic reviews, full health technology assessments, a six monthly horizon scanning report and other papers and reports related to the assessment of non-medicines technologies. The team also undertakes:

- literature reviews and syntheses in response to ad hoc requests from work programmes across the organisation
- training and advice in research methods and writing for publication, and
- training and support for evaluating projects.

Knowledge Management Team

The Knowledge Management Team provides a knowledge and information retrieval and dissemination service to support and underpin the delivery of the corporate priorities. This is based on the implementation of the NHSScotland ‘Knowledge into Action' strategy which aims to develop a culture which values and promotes experiential learning, tacit knowledge use and the sharing of these through dialogue and collaborative working.

This team also provides organisational information governance support to ensure the necessary safeguards for, and appropriate use of, patient, personal and corporate information.

Scottish Antimicrobial Prescribing Group (SAPG)

SAPG leads the national programme for antimicrobial stewardship to enhance the quality of antimicrobial prescribing and infection management in Scotland. The SAPG work programme comprises surveillance of antimicrobial use and resistance, quality improvement
interventions and education of healthcare staff and the public across hospital and community settings.

**Scottish Health Technologies Group (SHTG)**

SHTG is an advisory group set up to provide assistance to NHS boards when considering selected health technologies, excluding medicines which will be reviewed by SMC. The remit of SHTG is to provide advice on the evidence about the clinical and cost-effectiveness of existing and new technologies likely to have significant implications for patient care in Scotland. This advice should support the planning and decision-making processes in NHS boards. This includes a horizon-scanning function to provide early intelligence on health technologies in development.

**Scottish Intercollegiate Guidelines Network (SIGN)**

SIGN aims to improve the quality of health care for patients in Scotland by reducing variation in practice and outcome, through the development and dissemination of national clinical guidelines containing recommendations for effective practice based on current evidence.

SIGN involves patients and carers in all aspects of the guideline development process allowing their views and experiences to complement the research evidence, and the knowledge and experience of health care professionals.

**Scottish Medicines Consortium (SMC)**

SMC aims to benefit patients by providing NHSScotland with a single source of timeous advice about the clinical and cost-effectiveness of all newly licensed medicines.

SMC also has a horizon-scanning programme that supports financial and service planning for medicines in NHS boards across Scotland through the provision of early intelligence on new medicines in clinical development.

**Standards and Indicators Team**

The Standards and Indicators Team develops evidence-based standards and indicators to support local and national benchmarking and to aid the assessment of the quality of care. This work involves facilitation of groups of stakeholders, including patients and service users to define those aspects of care that would be a barometer of quality and to develop these into measurable standards and indicators.

**Research**

The Evidence Directorate leads the development and implementation of the corporate Research Strategic Plan to promote developing, disseminating and using research to support improvement in the delivery of safe, effective, and person-centred care. Teams across the Evidence Directorate participate in national and international research activity to further knowledge generation in areas, including guideline and HTA development and antibiotic prescribing.
You can read and download this document from our website. We are happy to consider requests for other languages or formats. Please contact our Equality and Diversity Officer on 0141 225 6999 or email contactpublicinvolvement.his@nhs.net

www.healthcareimprovementscotland.org

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The Healthcare Environment Inspectorate, the Improvement Hub, the Scottish Health Council, the Scottish Health Technologies Group, the Scottish Intercollegiate Guidelines Network (SIGN) and Scottish Medicines Consortium are part of our organisation.