Resource impact summary report

Resource impact

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This summary report is based on the NICE assumptions used in the [resource impact template](#). Users can amend the 'Inputs and eligible population' and 'Unit costs' worksheets in the template to reflect local data and assumptions.

Recommendations

NICE has recommended that seven digital technologies to support self-management of chronic obstructive pulmonary disease (COPD) in adults can be used in the NHS during the evidence generation period.

These technologies can only be used once they have appropriate regulatory approval including NHS England's Digital Technology Assessment Criteria (DTAC) approval.

The technologies should be used in line with [section 1.2 and 1.3 of the guidance](#).

Eligible population for the digital technologies

Around 1.1 million people are on the quality and outcomes framework register for COPD in England ([NHS Digital Quality and Outcomes Framework 2023-24](#)). It is not known how many people would be eligible to use the digital technologies, therefore organisations are encouraged to estimate the figure at a local level.

Current treatment options

The comparator for the digital technologies is standard care, which includes self-management of COPD without digital technologies. This may include face-to-face appointments and monitoring.

Digital technologies are intended to support self-management plans in addition to standard care.

Financial resource impact (cash items)

There will be additional costs incurred to implement the guidance. Costs will depend on the type of technology procured and the pricing arrangements in place. The technology prices are commercial in confidence and likely to vary across companies. For pricing details contact the relevant supplier of the technology.

There may be a reduction in exacerbations and potential slowing of progression of COPD and this may provide some savings to offset the potential costs of implementing the technologies. However, this is uncertain because of the limited evidence base, as there is uncertainty about how effective these technologies may be at reducing these symptoms in practice.

Due to a lack of robust data on current practice and the variation across organisations and services, potential financial resources should be estimated at a local level.

To calculate the financial impact of cash items, see the resource impact template.

Capacity impact

Implementation of the guidance may have the following capacity implications:

- reduction in GP appointments

- reductions in emergency department attendances, and hospital admissions

- staff time for training and monitoring of patients using the digital technologies

- staff time (one off) setting up the technologies - 7.5 hours per technology per year.

Table 1 Hospital admissions episodes for adults with a primary diagnosis of COPD in England

ICD10 code	Description	Number of episodes
J44.0	COPD with acute respiratory infection	158,060
J44.1	COPD with acute exacerbation	64,459
J44.8	COPD – other specified	748
J44.9	COPD - unspecified	9,405

ICD10 code	Description	Number of episodes
	Total episodes	**232,672**

The data in table 1 is based on NHS Digital's hospital admitted patient care activity 2023-24.

Abbreviations: COPD, chronic obstructive pulmonary disease.

To calculate the financial capacity impact from a commissioner (national) and provider (local) perspective, see the resource impact template.

Benefits to people with COPD

Implementing the guidance may:

- help improve the management of COPD through education, guidance, improved adherence, improved self-monitoring, and early detection of exacerbations

- help some people to self-manage better and require less care support in the home by increasing their knowledge, skills, and confidence in managing their own health

- help widen access to self-management resources for people who may not be able to access face to face appointments, and improve people's quality of life, through more effective self-management

- benefit people living in rural areas unable to travel due to the severity of their COPD, and those who cannot or do not want to take time off work.

The benefits may vary depending on the use of individual technologies.

Key information

Table 2 Key information

Speciality	Respiratory
Disease area	COPD
Programme budgeting category	PBC11X Problems of the respiratory system

Commissioner(s)	ICBs
Provider(s)	Primary care and community health
Pathway position	Treatment and management

About this resource impact summary report

This resource impact summary report accompanies the NICE health technology evaluation guidance on digital technologies to support self-management of COPD: early value assessment and should be read with it.

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