



Resource impact statement

Resource impact

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No significant resource impact is anticipated

The NICE guideline on bronchiolitis in children partially updates the former guideline NG9 published in 2015, and reviewed the evidence on oxygen saturation thresholds for referral to hospital, admission, management and discharge.

We do not expect this update to have a significant impact on resources; that is:

- the resource impact of implementing any single guideline recommendation in England will be less than £1 million per year (or approximately £1,800 per 100,000 population, based on a population for England of 56.3 million people) **and**
- the resource impact of implementing the whole guideline in England will be less than £5 million per year (or approximately £9,000 per 100,000 population, based on a population for England of 56.3 million people).

Updating recommendations 1.3.2 and 1.5.1 to amend the oxygen saturation level thresholds discussed from 92% to 90% may lead to a decrease in the number of children admitted to hospital with bronchiolitis, as well as leading to some children being discharged from hospital earlier following admission with bronchiolitis. However, oxygen saturation levels are 1 of several criteria used to decide whether to admit and discharge children with bronchiolitis to and from hospital.

Any reduced admissions and earlier discharge of children from hospital may lead to capacity benefits for hospitals but this is unlikely to lead to significant savings at a national level.

Services for children with bronchiolitis are commissioned by integrated care systems/ clinical commissioning groups, strategic transformation partnerships and NHS England. Providers are NHS hospital trusts, primary care providers and GPs.