**National Institute for Health and Care Excellence**

**NICE Charter - updates for 2021**

This report gives details of proposed updates to the NICE Charter.

The board is asked to:

* consider the updated NICE Charter detailed in Annex 1, and to approve the newly updated version for publication on the NICE website in April 2021, after the launch of the NICE 5-year strategic plan.
* discuss whether the Charter should be reviewed and brought to the Board annually, bearing in mind the legal requirement is for a review every 3 years.

Jane Gizbert

Director, Communications

March 2021

Introduction

1. NICE is legally required to publish a Charter by the [National Institute for Health and Care Excellence (Constitution and Functions) and the Health and Social Care information Centre (Functions) Regulations](https://www.legislation.gov.uk/uksi/2013/259/regulation/14/made) of 2013.
2. The regulations state that the Charter may include such information that NICE considers appropriate, but it must include information on:

* the procedures it establishes for carrying out its functions, and
* the consultation it undertakes in the establishment of its procedures and in the carrying out of its functions.

Legally, the Charter must be reviewed every 3 years. The board has previously requested to review the Charter on an annual basis. It was last updated and approved by the board in November 2019. However, we delayed this year's review for 4 months to ensure the updated Charter could be aligned with our new 5-year strategic plan.

Proposed updates and changes to the NICE Charter

An updated version of the NICE Charter can be seen in Annex 1 of this paper. The principal changes being suggested to the Charter for 2021 are:

* Updating the document throughout to ensure the language used to describe who we are, what we do and our value to the health and care system is consistent with our new 5-year strategic plan.
* The inclusion of a new, simplified section outlining how all of our guidance products are developed using published processes and methods, which are regularly reviewed and consulted on (paragraphs 7 and 8).
* The addition of a section outlining how we use evidence and data in our work, and how we work in research (paragraphs 13 and 14).
* The addition of a new paragraph explaining the role of NICE International (paragraph 15).
* The addition of a new paragraph on the Medtech Early Technical Assessment Tool (paragraph 18).
* The addition of reference to the NICE Office for Digital Health, which will have been launched when these updates are published (paragraph 22).
* The addition of a new paragraph outlining the NHS funding mandate for selected technologies approved through our Medical Technologies Evaluation Programme (paragraph 24).
* Updating digital accessibility wording, making reference to new legislation for public sector websites (paragraph 30).

The current version of the Charter, published in 2019, is available on the NICE website at [www.nice.org.uk/about/who-we-are](http://www.nice.org.uk/about/who-we-are) or on request.

Issues for decision

The board is asked to:

* consider the updated NICE Charter detailed in Annex 1, and to approve the newly updated version for publication on the NICE website in April 2021, after the launch of the NICE 5-year strategic plan.
* Discuss whether the Charter should be reviewed and brought to the Board annually, bearing in mind the legal requirement is for a review every 3 years.

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March 2021

Annex 1 - The NICE Charter incorporating all updates 2021

NICE Charter 2021

Who we are and what we do

1. The National Institute for Health and Care Excellence's role is to improve health and wellbeing by putting science and evidence at the heart of health and care decision making. We do this by:

* Providing independent assessment of a wide range of complex evidence to help commissioners, front-line practitioners, patients, carers, and citizens to take better informed decisions. These decisions may be about the care people receive, the safety of new procedures or the use of finite health and care resources.
* Working with those at the forefront of scientific advances and using our analytical skills, knowledge and expertise to identify, assess and develop timely recommendations for innovations that have a real and important impact on patients’ lives, on the delivery of health and care, and that represent good value for the system.
* Working with partners across the health and social care system to drive the uptake of effective and cost-effective new treatments and interventions to benefit the population as a whole and to improve and ensure equity of access to all members of society.

The system in which we work

Our work spans three inter-linked ecosystems: life sciences; guidelines and information. These are all linked through the provision of advice on best practice to help ensure the adoption of cost-effective innovation. Our distinct role is to provide an independent assessment of the value of existing and new treatments and interventions for the system, and to ensure front line professionals, the public and patients have access to the latest treatment, advice, and guidance.

Within the life sciences ecosystem NICE evaluates the clinical and cost effectiveness of technologies to determine funding decisions and assessing new interventional procedures for safety and effectiveness. The health economic lever is a critical one in the innovation pathway that impacts on the commissioning, funding, and adoption of new technologies.

Our work in the guidelines ecosystem entails developing best practice recommendations, advice, and quality standards primarily for front line practitioners but also for patients to support shared decision making and, increasingly, the shift to more self-care. Our guideline recommendations extend across the whole care pathway and the health, public health and social care sectors. They play a critical role in driving the adoption of best practice and the latest innovations supported by quality standards and indicators to track improvement. Guidelines also identify research priorities and support commissioners to deprioritise or stop funding interventions that no longer add value.

Within the information ecosystem we provide a wide range of evidence-based information and advice for use by others to support their work. This includes a critical portfolio of advice, including the British National Formulary, Clinical Knowledge Summaries, and the procurement of journals for the NHS.

The principles that guide NICE's work

NICE guidance and quality standards are developed to a high standard and in accordance with a set of [core principles](https://www.nice.org.uk/about/who-we-are/our-principles) that underpin all of our work and how it is produced. We are internationally recognised for the rigorous processes we use to produce our recommendations, and for the quality and accuracy of our products.

**Principle 1.** We prepare guidance and standards on topics that reflect national priorities for health and care.

**Principle 2.** We describe our approach in process and methods manuals and review them regularly.

**Principle 3.** We use independent advisory committees to develop recommendations.

**Principle 4.** We take into account the advice and experience of people using services and their carers or advocates, health and social care professionals, commissioners, providers and the public.

**Principle 5.** We offer people interested in the topic the opportunity to comment on and influence our recommendations.

**Principle 6.** We use evidence that is relevant, reliable and robust.

**Principle 7.** We base our recommendations on an assessment of population benefits and value for money.

**Principle 8.** We support innovation in the provision and organisation of health and social care services.

**Principle 9.** We aim to reduce health inequalities.

**Principle 10.** We consider whether it is appropriate to make different recommendations for different groups of people.

**Principle 11.** We propose new research questions and data collection to resolve uncertainties in the evidence.

**Principle 12.** We publish and disseminate our recommendations and provide support to encourage their adoption.

**Principle 13.** We assess the need to update our recommendations in line with new evidence.

Our methods and processes

Our independent advisory committees take a rigorous and structured approach to guidance development, based on processes and methods that are published on our website. We keep our methods and processes up to date by regularly reviewing them and consulting on changes with our stakeholders.

Our published processes and methods are as follows:

* [Developing NICE guidelines: the manual](https://www.nice.org.uk/process/pmg20/chapter/introduction)
* [Guide to the process of technology appraisal](https://www.nice.org.uk/process/pmg19/chapter/acknowledgements)
* [Guide to the methods of technology appraisal](https://www.nice.org.uk/process/pmg9/chapter/foreword)
* [Medical technologies evaluation programme process guide](https://www.nice.org.uk/process/pmg34/chapter/introduction)
* [Medical technologies evaluation programme methods guide](https://www.nice.org.uk/process/pmg33/chapter/introduction)
* [Diagnostics assessment programme manual](https://www.nice.org.uk/Media/Default/About/what-we-do/NICE-guidance/NICE-diagnostics-guidance/Diagnostics-assessment-programme-manual.pdf)
* [Interventional procedures programme manual](https://www.nice.org.uk/process/pmg28/chapter/introduction)
* [Interim process and methods of the highly specialised technologies programme](https://www.nice.org.uk/Media/Default/About/what-we-do/NICE-guidance/NICE-highly-specialised-technologies-guidance/HST-interim-methods-process-guide-may-17.pdf)
* [Antimicrobial prescribing guidelines: interim process and methods guide](https://www.nice.org.uk/Media/Default/About/what-we-do/NICE-guidance/antimicrobial%20guidance/Interim-process-methods-guide-antimicrobial-guidelines.pdf)
* [Timeline for developing quality standards](https://www.nice.org.uk/standards-and-indicators/timeline-developing-quality-standards)
* [NICE indicator process guide](https://www.nice.org.uk/media/default/Get-involved/Meetings-In-Public/indicator-advisory-committee/ioc-process-guide.pdf)

How we involve people

As part of our decision-making, we take into account the experiences, expertise, opinions and views of the people who will be affected by our work, including patients, carers and members of the public, as well as healthcare professionals, social care practitioners and representatives of NHS organisations, industry, social care businesses and local government.

Our consultation process enables individuals and organisations to comment on drafts of our recommendations throughout the guidance development process. Our guidance is created by independent and unbiased advisory committees that include experts such as clinicians, health economists and social workers, patients and carers or other members of the public. We also hear testimony from patient and clinical experts as part of the evidence we consider.

We value the input of patients, carers and the general public in our work. By involving them, we put the needs and preferences of patients and the public at the heart of our work. Our Public Involvement Programme supports individual patients, carers and members of the public, as well as voluntary, charitable and community organisations involved with NICE's work.

Working with system partners

NICE works closely with system partner organisations including NHS England and NHS Improvement, the Medicines and Healthcare products Regulatory Agency (MHRA), the Care Quality Commission, NHSX, NHS Digital, Public Health England, Health Education England, the Social Care Institute for Excellence, the Local Government Association, ADASS, ADCS, the royal colleges and devolved administrations. By forming key strategic partnerships, we harness the power of collaboration to maximise the value we create for the health and care system.

Working with evidence and driving the research agenda

We quality appraise and analyse a wide range of evidence to inform our work. We support new data collections to address areas of uncertainty and continue to increase and extend the use of data in the development and evaluation of our guidance – making use of electronic health record data and real-world data, for example. We keep abreast of technological developments to assess whether new sources of potentially relevant evidence may be useful in the development or evaluation of our guidance.

We proactively seek to drive the research agenda and funding priorities by collaborating with academia, government and industry to ensure that issues of most relevance to NICE's methods and patient care are addressed.

Our international role

Through NICE International, we provide global support to help other countries improve their nation’s health and wellbeing, representing the UK on the world stage. We collaborate with international health organisations, ministries and government agencies to make better and more cost-effective health and care decisions, improve care quality and reduce variation in access to care, making it fairer for all.

Working with the life sciences industry

Much of what NICE does has an impact on the life sciences industry that supplies the NHS. We are very conscious of the responsibility we carry when we advise the NHS on the use of health technologies. We know that what we say about new technologies is often taken into account by health systems elsewhere in the world. For these reasons, we regard the relationship we have with industry and individual companies as having equal importance with our other stakeholders. We work with the industry associations and companies in the UK and internationally to build mutual respect and trust.

NICE plays an important role in horizon scanning for new medicines, medical devices, diagnostics and digital products in development. Information about identified products is shared with national partner organisations to support NHS budget and service planning, which enables the faster uptake of innovations across the NHS.

Our fee-for-service [Scientific Advice Programme](https://www.nice.org.uk/about/what-we-do/life-sciences/scientific-advice) engages life sciences companies to help them understand the evidence requirements of NICE’s advisory committees. NICE Scientific Advice also provides the [Medtech Early Technical Assessment (META) tool](https://meta.nice.org.uk/) that facilitates an evidence gap analysis for medical technology, diagnostic and digital health companies.

The NICE [Office for Market Access](https://www.nice.org.uk/about/what-we-do/life-sciences/office-for-market-access) (OMA) works with life sciences companies on a fee-for-service basis. It facilitates multi-stakeholder engagement meetings where a range of market access issues can be discussed. OMA gives commercial stakeholders access to a dedicated team at NICE, offering tailored support to help them optimise their products’ journey through NICE and their pathway to the NHS market.

NICE’s commercial liaison team supports the development of commercial agreements entered into by NHS England and NHS Improvement with life science companies.

The managed access team at NICE supports companies in designing their data collection plans for managed access agreements. We also work in partnership with NHS England and NHS Improvement to operate the [Cancer Drugs Fund](https://www.england.nhs.uk/cancer/cdf/). The fund provides a fast-track route for access to cancer treatments that require a further period of evidence-collection, before a final decision can be made about their routine use. It also allows speedier access to clinically and cost-effective treatments that have been recommended by NICE, with treatments becoming available within the NHS before final NICE guidance is published.

Developers of digital health technologies can engage with NICE through any of the routes available to other life sciences companies. The NICE Office for Digital Health can help route digital health technology developers to the right NICE service.

The status of our guidance

Different types of NICE guidance have a different status within the NHS, public health and social care. Our technology appraisals and highly specialised technologies guidance are unique because clinical commissioning groups, NHS England and NHS Improvement and local authorities are required to fund and resource medicines and treatments recommended through these programmes. The legal status of this mandatory funding is reinforced in the NHS Constitution and the Health and Social Care Act 2012. The NHS Constitution states that patients have the right to drugs and treatments that have been recommended by NICE for use in the NHS, if the doctor responsible for the patient’s care says they are clinically appropriate. The Health and Social Care Act 2012 also states that the Secretary of State and the NHS Commissioning Board (now NHS England and NHS Improvement) should have regard to the quality standards prepared by NICE as part of their duty to secure continuous improvement in the quality of services.

The introduction of selected technologies, which NICE recommends through its Medical Technologies Evaluation Programme, can also be accompanied by an NHS funding mandate.

Health and social care professionals are actively encouraged to follow the recommendations in our other guidance to help them deliver the highest quality care. Of course, our recommendations are not intended to replace the professional expertise and clinical judgement of health professionals, as they discuss treatment options with their patients.

We measure the use of NICE guidance and publish impact reports showing how our recommendations have been used in practice to improve outcomes in priority areas. Our impact reports are based on publicly available data and other sources which contain information about the uptake of our work.

Communicating about our guidance, standards and other resources

We disseminate and clearly communicate our guidance and other advice products to those responsible for putting them into practice. We raise awareness of the value of our work with system partners and stakeholder organisations. We also promote our work and explain the role evidence-based care plays in improving health outcomes to the wider public.

Through our audience insights and user feedback work, we ensure that the views and expectations of NICE’s audiences are systematically gathered and interpreted.

We continue to innovate how our guidance is presented and structured.

We are committed to [making our products accessible](https://www.nice.org.uk/accessibility), in accordance with the Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018. Website improvements and new digital developments are user-centred and meet WCAG 2.1 AA standards.

Patients, people using services, carers and the public can also use NICE guidance and other products as a guide to the high-quality care they should expect to receive.

Putting our recommendations into practice

When used effectively, NICE resources can support demonstrable improvements in health and social care outcomes and contribute to the national drive to reduce health inequalities.

Our guidance is relevant to charities, voluntary and community organisations, residential care homes, private sector employers, patients, carers, service users and the public as well as the NHS and local government. We do our best to provide support for all these groups to put our recommendations into practice.

We deliver a substantial programme of support to encourage improvement and change in practice. For example: we work with key strategic health partners to ensure our guidance is embedded into regulation, monitoring and quality improvement frameworks; we also facilitate the availability of support tools which make following our guidance more straightforward and we work with organisations and networks to encourage, inform and facilitate their implementation activities on a local level.  
We are aware that NICE guidance sometimes recommends changes in practice which the NHS, local government and social care providers may find difficult to implement, especially when faced with limited resources and differing local budget priorities. NICE is committed to supporting commissioners and providers, local authorities and organisations in the wider public and voluntary sector to make the best use of their money, setting out the case for investment and disinvestment through our guidance programmes and our other advice.