National Institute for Health and Care Excellence

Centre for Health Technology Evaluation progress report

1. This report provides an overview of the work and achievements by staff and programmes in the Centre for Health Technology Evaluation, focussing on January and February 2021.

Summary of activity

We initiated conversations with health system partners to establish how NICE can best add value to the introduction, evaluation and use of genomics.

We actively participated in the Innovative Licensing and Access Pathway through membership of its Steering Group and work packages, culminating in the first Innovation Passport awarded to a promising treatment for a cancer-causing rare disease.

We celebrated the first year of NICE’s relaunched international advisory service, NICE International, in a session hosted by the All-Party Parliamentary Group on Global Health.

We started work on the second phase of the process and methods review for our health technology evaluation programmes.

We largely delivered the planned work in the various programmes.

Notable issues and developments

Ongoing response to COVID-19

RAPID-C19 continued to monitor a large number of potential treatments for COVID-19, supporting a multi-agency response to the pandemic. Its work has been referred to in the section on therapeutics in DHSC's COVID Spring Roadmap (<https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/963491/COVID-19_Response_-_Spring_2021.pdf>).

After receipt of more data from the DHSC, the first meeting of the panel for the COVID-19 testing MIBs was held on 24 February to consider the OptiGene Direct Plus test.

Technology Appraisals and Highly Specialised Technologies have prioritised guidance development, utilising the resource support offered from other programmes across the centre. In total 5 topics (4 x TA and 1 x HST) have been delayed due to capacity constraints. The programme is working to reschedule these topics at the earliest opportunity and with minimal impact.

NICE Scientific Advice and NICE International have continued to deliver projects over January and February that were already contracted but were required to cancel or postpone several projects and engagements in order to respond to the request for additional capacity to support the guidance producing programmes during lockdown. This is reflected in figure 1 below.

OMA engagement services have been paused from February 2021 - April 2021 to allow OMA resource to be directed to support priority activities in guidance production and the AMR project.

We continue to monitor the impact of COVID-19 on data collection for existing managed access agreements and commissioning through evaluation projects, with an awareness that the latest surge has had further impact on patient treatment and data collection.

Supporting innovation

We have developed guiding principles for managed access, which along with input from key stakeholders, will inform the development of the innovative medicines fund (IMF) engagement document. The engagement document is being drafted in preparation for a public consultation, due to launch in Spring 2021.

We continued collaborative working with the MHRA on the development of the ILAP. Alongside this work, we are also developing the ILAP/NICE interface processes so that appropriate NICE activities can be undertaken on technologies which have been awarded an Innovation Passport.

HealthTech Connect continues to support horizon scanning and topic selection of devices, diagnostics and digital technologies. 378 technologies have been submitted, and NICE selected 20% for a Medtech Innovation Briefing or NICE guidance. Plans are in place to broaden the remit and reach of HealthTech Connect by integrating it with the forthcoming AAC innovation service.

Digital technologies

In line with NICE’s ambition to enhance collaboration with system partners on activities supporting future regulatory and health technology assessment offers for digital and AI health technologies, NICE has signed two MoUs with the Department of Health and Social Care. The first of these agreements is in place to support the gap analyses NICE Scientific Advice will provide for the winning technologies in the four rounds of the Acceleration Access Collaborative’s AI in Health and Care Award and the second is to provide funding for the design, development and testing of a multi-agency advice service for developers and adopters of AI and data driven technologies. Over January and February, stakeholder interviews have been carried out as part of the discovery phase for the multi-agency advice service and will inform plans for the next phase of development starting in Spring.

We are currently developing guidance on a digital product, Sleepio for adults with difficulty sleeping (MT443). This technology will be considered by the medical technologies evaluation committee at its March meeting.

Genomics

In February, we organised a workshop with Genomics England, NHSE/I, and the Office for Life Sciences to identify opportunities and challenges for the assessment of genomic technologies, and to understand how the partner organisations can work together to maximise value for the NHS as it delivers on its genomics strategy.

The Genomics Medicine Service (GMS) is currently focussed on the provision of genomic tests in the areas of rare and inherited diseases, cancer and pharmacogenomics. There was a clear need and appetite for further collaboration between partners and key areas identified for future discussions were: joint horizon scanning providing a single “front door” for the genomics ecosystem; development of broader methodologies and frameworks (including analysis of real world evidence and genomic data); collaborative working to align NICE guidance outputs and the GMS testing directory; impact of the new IVDR; and NICE membership of the NHS Genomic Medicine Service Research Collaborative.

The Diagnostics Assessment Programme is leading on the development of a genomics strategy for NICE and is continuing its ongoing work in genomic-related methods. It is expected that the strategy will require input from many teams across NICE. A briefing paper providing detail on “next steps” is being developed. We expect to be able to provide an update to the Board in the next months.

Methods and process review

The consultation on the CHTE process review proposals for change started on 4 February. Due to the recent Government restrictions, the consultation period was extended to allow stakeholders more time to consider their responses, this consultation will now close on 15 April.

Due to the additional time provided for the consultation on the process review and continuing capacity constraints in the early part of the year because of COVID, we have decided to reschedule consultation on the draft unified manual. A report on the consultation responses for both the methods and process reviews and the draft unified methods and process manual will be presented to the NICE Board in July 2021. We will use the additional time for further engagement with key stakeholders.

International collaboration

In January, NICE international delivered a 1 year anniversary event to showcase their achievements since the relaunch in November 2019, which was hosted by the All-Party Parliamentary Group (APPG) on Global Health. The team also initiated a third phase of HTA workshop series with Brazil, supported by the Department of International Trade in Latin America, a knowledge transfer activity with the Institute for Health Economics and Policy (IHEP) in Japan, and further advisory work under the Better Health Programme (BHP). Following on from BHP activities last year with the Philippines, NICE international also hosted a technical forum for NICE staff, inviting partners from the Health Technology Assessment Council (HTAC) in the Philippines to present on their recent experiences in HTA.

HTAi 2021

The annual meeting of Health Technology Assessment international (HTAi) was scheduled to be held in Manchester in June. Due to the impact of COVID-19, it has been confirmed that the HTAi 2021 Annual Meeting will move to a virtual format. We are working closely with HTAi on the arrangements for a virtual meeting, including opportunities to showcase NICE's work and that of the other host organisations (Health Improvement Scotland and the All Wales Therapeutics and Toxicology Centre).

Key risk

We are unable to adequately respond to the opportunities for collaboration with system partners, including the AAC, MHRA, NHSE&I, NIHR and NHSX to support future regulatory and health technology assessment offers due to a lack of capacity.

Non-guidance outputs

Figure 1 presents non-guidance outputs of programmes of work within the centre. Variation in budget impact assessments and commercial briefings are the result of in year fluctuations in demand rather than issues with performance. Variation in scientific advice and NICE international are referred to above (para 10).

Figure 1 Performance against plan for non-guidance outputs in January and February 2021

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March 2021