National Institute for Health and Care Excellence

Report from the Executive Team

This is the Executive Team report to the Board covering key priorities and areas of progress since the last Board meeting, structured by pillars of the strategy and the business plan, as well as any key emerging risks. It sits alongside the integrated performance report, which provides data on the status of key performance indicators and business plan deliverables.

The Board is asked to review the report.

Gillian Leng, Chief Executive

Meindert Boysen, Deputy Chief Executive and Director, Centre for Health Technology Evaluation

Paul Chrisp, Director, Centre for Guidelines

Jane Gizbert, Director, Communications

Nicole Gee, Interim Chief People Officer

Jennifer Howells, Director, Finance, Strategy and Transformation

Felix Greaves, Director, Science, Evidence and Analytics

Judith Richardson, Acting Director, Health and Social Care

Alexia Tonnel, Director, Digital, Information and Technology

November 2021

Introduction from the Chief Executive

1. NICE continues to deliver our seven priorities for 2021/22, while also looking ahead to the new year through our business and financial planning for 2022/23. Our priorities are to: support recovery from COVID-19; undertake rapid and responsive technology evaluations; provide living guidelines; enhance NICE's international position; increase our capacity to assess digital technologies; build new channels of engagement; transform our organisation; and create financial sustainability.
2. This Executive Report provides updates on prominent guidance, a brief note about our ongoing work to support COVID-19 recovery, and sets out progress on business plan deliverables aligned against pillars of the strategy. Business plan deliverables are included where there is a specific recent achievement to report, or a forthcoming milestone.

Prominent guidance

Guideline on myalgic encephalomyelitis / chronic fatigue syndrome

1. NICE published its updated guideline on the diagnosis and management of myalgic encephalomyelitis (or encephalopathy)/chronic fatigue syndrome (ME/CFS) on 29 October. The guideline was published following a roundtable meeting with representatives from a range of patient and professional organisations, to discuss concerns raised about some aspects of the guideline that had led to the publication of the guideline being paused.
2. A notable change from the previous ME/CFS guideline is to make clear that any programme based on fixed incremental increases in physical activity or exercise, for example graded exercise therapy (GET), should not be offered for the treatment of ME/CFS. This change was widely welcomed by patient groups.

Crizanlizumab for preventing sickle cell crises in sickle cell disease

1. Crizanlizumab (Adakveo, Novartis) has been recommended by NICE as a treatment option for preventing recurrent sickle cell crises in people aged 16 or over. It is the first time in 20 years that a new therapy for sickle cell disease has been made available on the NHS. More than 300 people a year are expected to receive the treatment via a Managed Access Agreement, increasing to more than 450 people in subsequent years.
2. Current treatments to prevent sickle cell crises include a tablet called hydroxycarbamide and regular blood transfusions, which are not always effective for people with severe disease. Crizanlizumab is a new intravenous treatment option that can be taken on its own or alongside hydroxycarbamide. Clinical evidence suggests that people treated with crizanlizumab have significantly fewer sickle cell crises in a year than those receiving other standard treatment options.
3. There is high uncertainty about the long-term effectiveness of the treatment and the cost-effectiveness, so crizanlizumab could not be recommended for routine use on the NHS at this stage. Instead, the committee recommended the treatment through a Managed Access Agreement with the NHS, which will allow people to access crizanlizumab while additional data is collected to address these uncertainties.

Draft guideline on Integrated Health and Social Care for people experiencing homelessness

1. NICE and the Centre for Homelessness Impact (CHI) have jointly published a new draft guideline to increase access to health and social care services for people experiencing homelessness, to improve their health outcomes. The draft guideline (published 6 October) covers people aged over 16 experiencing homelessness, including people sleeping rough, staying in temporary accommodation or ‘sofa surfing’ with family and friends.
2. The draft guideline highlights that more effort and targeted approaches are often needed to ensure that people experiencing homelessness have access to the same standard of health and social care as the general population. It recommends that care should be delivered via specialist multidisciplinary teams which span all sectors of care and be tailored to meet local needs.

Supporting recovery from COVID-19

1. We continue to support recovery from the COVID-19 pandemic through updating and developing guidance recommendations as new, relevant evidence becomes available. In October, we provided an update to the Managing COVID-19 guideline with new recommendations for the monoclonal antibodies casirivimab and imdevimab, and updated existing recommendations on tocilizumab and sarilumab. The monoclonals are for hospitalised patients who test negative for antibodies.

Key updates aligned to the strategic pillars

Pillar 1 - rapid, robust, and responsive technology evaluation

Publish updated methods and processes for the evaluation of technologies

1. Work is progressing on our significant programme to update the methods and processes for the selection and evaluation of technologies. The public consultation on the proposed changes to topic selection, methods and processes of health technology evaluation closed on 13 October 2021. We received responses from over 170 organisations, providing a range of perspectives. Alongside the open public consultation, targeted engagement was conducted with patients and with industry.
2. The next steps are to complete the review of consultation comments and then update the methods and process manual ahead of publication and implementation of the new methods and processes in the new year.

Increase our capacity and capability to assess digital technologies

1. Work continues to enhance our capacity and capability to identify and evaluate digital health technologies. NICE will focus in particular on technologies which could have the largest positive impact on population health and on the health and care system.
2. The Office for Digital Health microsite on the NICE website is now live. Further content will be added to and aligned with this front page as it becomes available

# Multi Agency Advice Service (MAAS)

1. Work on the Multi-Agency Advisory Service (MAAS) for artificial intelligence (AI) and data-driven technologies (AI&DDT) continues to progress at pace, with work soon to commence on building and hosting a beta version of the MAAS. BJSS, the digital agency supporting the work, has developed and iterated prototypes in seven rounds and undertaken in depth testing of these prototypes with 30 developers and adopters of AI and five users with accessibility needs. A regulatory pathway mapping document (a detailed account of the legislation and guidance for AI products in the health and care system) has been developed and reviewed by our national partners.
2. Further to publication of several policy papers on AI, including the NHSx draft AI Strategy and Government AI Strategy as well as MHRA consultation document, the MAAS working group held ‘study groups’ to discuss these developments and ensure they are appropriately integrated into the workings of the MAAS. A workshop with MAAS partners and the Turing Institute was held on the 19 October, exploring the topic of safe and effective real-world deployment of AI. RAND Europe, the independent evaluation partner, have developed a plan for baseline data collection to allow MAAS to measure its progress against the status quo. Additionally, the recruitment for the Senior Scientific Adviser for AI post has successfully concluded, with a candidate appointed subject to relevant checks.

Explore managed access approaches for medical technologies

1. The managed access pathway continues to be piloted within the multiple technology appraisal (MTA) of hybrid closed loop system for managing blood glucose levels in type 1 diabetes. Other potential pilot topics are also being identified. The managed access pathway is now being developed by a dedicated expert team within NICE.
2. The working group with NHSE/I, AAC, OLS and NHSx teams has developed an iteration of the Abbreviated Technology Appraisals process which have been presented to the AAC board. Work is ongoing to develop the approach to contingent reimbursement during evidence collection and NICE guidance development processes.

Develop a Life Sciences Hub on the NICE website

1. An internal candidate has been appointed to lead development of the Life Sciences Hub. Deloitte has been appointed as the contractor for a short project to help define the scale and scope of the Life Sciences Hub, and stakeholder interviews have begun. Surveying life sciences industry partners about their experiences of using the NICE online processes will begin shortly, to inform service design for the Hub.

Pillar 2 - dynamic, living guideline recommendations

Adopt a guideline authoring tool

1. NICE is prioritising the guidelines portfolio to identify early candidates for the production of dynamic, living guideline recommendations that are in line with system priorities. Initial classifications of guidelines have now been completed for review by the Cross Agency Topic Advisory Group.
2. An early candidate for an integrated guideline is the management of Type 2 Diabetes. New content has been developed for this topic, which has been tested with users and applied to a guideline authoring tool that can support living guidelines. These guidelines are now being tested for interoperability with related systems, including evidence management and publishing. Following further content development and testing, findings will be reported in early 2022 to outline the suitability and acceptability of MAGICapp as a structured guideline authoring tool. This report would consider whether MAGICapp could deliver NICE’s vision for dynamic, living guidelines across health, social care and public health, presented in an interactive, digitalised format to meet the needs of our users and partners. This decision on whether or not to use MAGICapp will take into account its utility as a development tool and as a publishing tool.

Collaboration agreement with Cochrane

1. In September, NICE and Cochrane signed a collaborative agreement that will help to deliver ‘living’ recommendations across the NICE guideline portfolio. The agreement will mean that the NHS and patients will benefit from a collaborative process to enable NICE to better use Cochrane reviews in response to changes in the evidence. The partnership will allow NICE to make efficient and effective updates to the recommendations in its guidelines.

Develop new mechanisms to gather system intelligence.

1. We are reviewing the multiple ways in which we collect data, insight and intelligence from users of our guidance, partners and stakeholders to ensure this intelligence is used consistently and to the greatest possible benefit for patients and our partners. A series of detailed process workshops were held with teams across the organisation who conduct consultation activity, resulting in ideas for improvement that the project team are using to inform the development of solutions.

Pillar 3 - effective guidance uptake to maximise our impact

Review our approach to addressing health inequalities

1. A number of cross-cutting workstreams continue to progress, seeking to develop and embed a stronger approach to addressing health inequalities in NICE. A new external advisor on health inequalities joined NICE in September, working part time to support the cross-cutting work on health inequalities and to engage external stakeholders for input into technical workstreams.
2. A prototype equity impact calculator, developed with the University of York, continues to progress and was recently presented to interested staff at a NICE technical forum. The prototype calculator received very supportive comments at the forum and was of significant interest to attendees. The calculator provides a framework for quantitatively and qualitatively considering health inequalities from scoping to implementation of services.
3. NICE is working with NHSE on two projects to develop our approaches to addressing health inequalities. Work is progressing to develop standards that will underpin a health inequalities improvement delivery matrix, and to embed shared decision making in elective recovery.

State how our guidance adds value to the system

1. A roundtable event was held with our national partners in the health and care system to discuss how the different types of NICE guidance are used and viewed in the system, and how that can benefit healthcare organisations and patients. Based on that discussion, we will develop final product setting out how NICE guidance adds value to the system.

Update the implementation strategy to improve adoption of our recommendations and to include the role of Integrated Care Systems

1. Redevelopment of our Implementation Strategy is progressing well. We have undertaken a significant amount of internal exploration and engaged externally with key stakeholders and experts in implementation science to determine where we need to put our effort to improve the uptake and impact of our guidance. We are proposing a new NICE-wide strategy, making implementation everybody's business, with 4 strategic aims: embedding implementation upstream; strengthening external collaboration and partnerships; developing implementation campaigns for system priorities; and increasing the use of data for uptake and impact. The draft strategy has been developed in collaboration with the Implementation Strategy Oversight Group that has representatives from all centres and directorates and will be brought for review by the Board in January.

The new role of Integrated Care Systems

1. Two roundtable events were held focussing on how NICE can engage with partners to support innovation and system recovery in the context of Integrated Care System (ICS) development. The roundtable events included attendees from across arm's length bodies, royal colleges, patient groups, academic health science networks, life sciences, and representatives of industry, providers and commissioners.
2. Issues highlighted included the opportunity to work with partners to address the specific challenges facing ICSs across pathways including systems for horizon scanning and demand signalling, innovative approaches to collecting evidence and developing guidance and packaging existing guidance to support ICSs in the issues they face. Plans are underway to develop a narrative outlining how NICE can support ICSs and a field team engagement plan.

Pillar 4 - leadership in data, research, and science

Establish “NICE Listens” for deliberative public engagement

1. NICE Listens, our new mechanism of ‘deliberative engagement’ with the public about complex moral ethical issues, has held its first public engagement on the topic of health inequalities.
2. Led by the Science Policy and Research Programme in consultation with NICE’s Public Involvement Programme, and in partnership with an external research agency, Basis Research, the workshops are being carefully designed to build on each other in an iterative way, providing increasing amounts of information each time to allow informed discussions. An online platform provides a space for participant communication between workshops, keeping the conversations going and allowing people to share their views as they develop.
3. The outputs of this workshop – as well as a wider programme of stakeholder engagement on this topic - will inform NICE’s plans for tackling health inequalities in the future.
4. The next topic identified for NICE Listens is the consideration of environmental impact in NICE guidance.

Consider the environmental impact of health and care interventions

1. NICE has committed to lead on the potential to include environmental impact data in its guidance to reduce the carbon footprint of health and care. As part of this, NICE aims to develop a framework to standardise how data related to the environmental impact of interventions and health technologies is used in its guidance and advice products. NICE has commissioned research through our External Assessment Centres to determine the feasibility of such a framework, which has recently commenced.
2. NICE teams worked with colleagues from the Greener NHS National Programme on text for NICE’s commitments for sharing at the COP-26 conference in November.
3. Leadership for environmental sustainability within NICE is being provided by a newly established ‘Environmental Sustainability Oversight Group’, chaired by Felix Greaves. The first meeting took place in September 2021.

Progress on strategic enablers

Digital workplace and data management

1. In Spring 2021, the Board approved a business case to invest in building an efficient digital workplace at NICE to support delivery of our strategy and ensure we continue to deliver our core functions effectively. After initial mobilisation, a 4 month foundation piece including the build of a ‘demonstrator’ service is now underway. ‘Project spaces’ has been selected as the demonstrator service. Recruitment of critical business change and project support roles continues to prove challenging. Whilst this is currently being managed through flexible collaboration with our implementation partner where possible, the resource gaps are impacting on the delivery capacity of the team and may result in delays to the programme if not resolved in the next couple of months.
2. Alongside this programme, work is progressing in a number of areas to improve the management of operational data. This includes a new tool to manage Timelines data across NICE, and will eventually be used by more than 300 staff across the Institute. A beta phase of work will commence in April 2022.
3. A proof of concept for integrating stakeholder registration has been completed and the team is planning for the next steps that will include the ongoing work to roll out the NICE Identity and Access management solution across services. We are also undertaking a proof of value of Master Data Management tooling for processing contacts information more efficiently in future. A CRM (customer relationship management) system analyst has started to map the stakeholder CRM landscape. This work will feed into the development of enhanced CRM options for NICE to consider.

Sustainable organisation and transformational change

1. As noted at the September Board meeting, Deloitte was appointed as an implementation partner to independently review research, cutting edge thinking, and best practices from other organisations on the ‘future world of work’. They are nearing completion of an initial mapping of current and future skills within NICE and are in the process of validating this across the organisation. This will be used to inform our skills gaps and organisational design requirements. Deloitte also produced a report on ‘The Future of Work’, based on a review of more flexible, technologically advanced ways of working which is being used to inform NICE’s position about hybrid working.

Key risks

1. The risk of most concern to the Executive Team remains NICE’s organisational capacity, including senior leadership capacity to deliver the strategy in hard to fill specialist roles. As stated above, a small number of new senior posts are open for recruitment, while we are working flexibly within NICE and with our implementation partners to fill technical gaps. We underwent a process of prioritisation of business plan objectives to reduce demands on staff where possible, while maintaining delivery of the strategy and our core activity.
2. We are waiting to hear the detailed outcome for NICE of the recent Comprehensive Spending Review, which included bids from NICE relating to our work to deliver the Life Sciences Vision and support the UK health regulatory framework and to deliver the internal transformation underpinning delivery of our strategy. Depending on the outcome of those bids, we may need to prioritise delivery of some objectives within our plans to ensure we have sufficient resources for their delivery.

© NICE 2021. All rights reserved. [Subject to Notice of rights](https://www.nice.org.uk/terms-and-conditions#notice-of-rights).

November 2021