Board meeting

16 December 2022

Executive team report

Purpose of paper

For discussion

Board action required

The Board is asked to review the report.

Brief summary

This is the Executive Team (ET) report to the Board. It updates the Board on the key priorities and areas of progress since the last Board meeting. It sits alongside the integrated performance report, which provides data on the status of our key performance indicators and business plan deliverables.

Board sponsor

Sam Roberts, Chief Executive and the Executive Team

Executive summary

1. NICE has a key role within the Health and Care system, acting to get the best care to patients fast, while ensuring good value for the taxpayer.
2. This report from the Executive Team presents progress across the organisation since the last board meeting in 4 keys areas: focusing on what matters most, creating useful and usable advice, learning from data and implementation, and building an organisation as brilliant as the people in it.

Focusing on what matters most

1. NICE speeds access to care that generates significant health gains, addresses key areas of unmet need, and tackles health inequalities. Progress on this was achieved in 3 key projects:
2. **In November, NICE published draft guidance recommending three treatments for COVID, which have the potential to benefit thousands of people during the imminent high-pressure winter period.** Nirmatrelvir plus ritonavir; tocilizumab; and baricitinib (subject to appropriate marketing authorisation) are recommended for future routine commissioning.
3. Triple-negative breast cancer has fewer treatment options and accounts for a disproportionately high number of breast cancer deaths, particularly affecting younger women and Black women. **NICE has published 3 positive pieces of guidance for this cancer type in little over 4 months.** 1,600 women are expected to be eligible for treatment with pembrolizumab following publication of final draft guidance in November.
4. **Continuing our focus on addressing health inequalities, a new, practical, online health inequalities resource for Integrated Care Systems was launched in September.** This provides NICE-recommended, evidence-based approaches, aligned to key frameworks. In November, 900 delegates registered to attend a virtual launch event highlighting NICE’s work in this area.

Creating advice that’s useful and useable

1. Whilst preserving our independence, transparency, and rigour, we are improving the speed and proportionality of our advice and working to make it more usable for our key stakeholders.

Proportionate assessments

1. Under our new **Early Value Assessment (EVA) model we can give earlier access to promising products**. Draft guidance published in November conditionally recommended five digital cognitive behaviour therapies for children and young people with mild to moderate anxiety, while further evidence is generated.
2. The newly launched [early value assessment for medtech](https://urlsand.esvalabs.com/?u=https%3A%2F%2Fnice.us8.list-manage.com%2Ftrack%2Fclick%3Fu%3D7864f766b10b8edd18f19aa56%26id%3De955579f90%26e%3Dcde96c1253&e=9f250c40&h=82aed928&f=y&p=n) online resource delivers up-to-date information and sets out **9 further priority topics currently being assessed under EVA**, including digital therapies for adults with anxiety and depression, AI tools for x-ray lung cancer diagnosis, and innovative diagnostics for urinary tract infections.
3. **Other proportionate approaches being tested include a light-touch, faster evaluation where similar medicines have already been evaluated** (for example our evaluation of [somatrogon for growth disturbance in children](https://www.nice.org.uk/guidance/indevelopment/gid-ta10989)  ) **or using the more efficient process of pair wise evaluation**  (for example, our evaluation of [Empagliflozin](https://www.nice.org.uk/guidance/indevelopment/gid-ta10946) and [Dapagliflozin](https://www.nice.org.uk/guidance/indevelopment/gid-ta10942) for chronic heart failure). A new [online resource](https://www.nice.org.uk/about/what-we-do/proportionate-approach-to-technology-appraisals) sets out how our new proportionate approach has the potential to expand new evaluation capacity by 20%.

More useable advice

1. Our **digital living guidelines programme has redesigned content, developing a proof of concept for breast cancer content.** This brings together new design, improved content structure, and updated technology to deliver user centred updates rapidly as new therapeutics are appraised and commissioned. Further information is available on the newly launched [webpage.](https://urlsand.esvalabs.com/?u=https%3A%2F%2Fnice.us8.list-manage.com%2Ftrack%2Fclick%3Fu%3D7864f766b10b8edd18f19aa56%26id%3Da0bcc703c3%26e%3Dcde96c1253&e=9f250c40&h=365048c4&f=y&p=n)

Be part of a system that continually learns from data and implementation

1. NICE learns from real world data and experience with implementation to ensure our advice is implementable.
2. **Together with the MHRA, NICE has been awarded £1.8m funding by Wellcome over three years to research, and produce guidance on, regulating digital mental health tools.** Working with international partners, engaging with people with lived experience, subject experts and current patients, our work will enable shared learning and consensus on the global regulation of digital mental health tools.
3. **NICE has partnered with international health technology assessment agencies**, including those in Canada, Australia, Scotland, and Wales **to boost collaboration on shared opportunities and challenges.** Initially focussing on: COVID-19; futureproofing of HTA systems; collaborating with regulators; work-sharing and efficiency gains; digital and artificial intelligence, this work has can increase NICE’s global influence and offers an efficient way to deliver key strategic work.
4. A **successful brand campaign pilot, aimed at commissioners from new Integrated Care Boards** across health and social care ran for 6 weeks from mid-October. Through positioning NICE as a stable source of support, highlighting to this audience NICE’s useful and usable advice, and our focus on what matters, these communications activities work to maximise our impact.

Be an organisation as brilliant as the people in it

1. Staff have told us that NICE could be more empowering and accountable, innovative and radical, collaborative and united. We know we need to retain our focus on our end-users (people/patients, service providers and policy makers) to achieve our mission.
2. Throughout November, we have been **engaging with staff on our crowdsourcing platform ‘fulfilling our ambitions together’**, asking for ideas on the future development of NICE. There has been enormous enthusiasm and positive energy around doing things differently to deliver on NICE’s ambitions. 325 ideas, more than 2,740 comments and 10,000+ votes have been submitted across 4 key challenges identified from our earlier engagement.
3. Our **digital transformation has reached a key milestone with the transition to Microsoft OneDrive now completed, enabling more collaborative and efficient ways of working among NICE staff.** A pilot expanding the use of digital recruitment tool Trac to recruit NICE committee members has completed successfully. Roll out for all committee recruitment will provide substantial benefits for internal and external users when in managing and applying for committee positions.
4. We are **modernising the look and feel of the NICE website** to enable us to better tell the NICE story and deliver an immersive and engaging storytelling experience for our range of stakeholders. The new site offers greater flexibility of page layouts, embedded multi-media content, improved accessibility, and allows us to distribute our content across our social media channels.
5. We **continue to invest in building the skills of NICE staff to support their ongoing development and address resource gaps**. Alongside the ongoing delivery of our management development programme, we are delivering courses focusing on collaboration, critical thinking, decision making, and influencing for individual contributors. In partnership with the York Health Economics Consortium we have also launched a new suite of health economics training models for technical staff.
6. We have made **key executive appointments to support delivery of NICE’s ambition, and reshaped the Chief Executive Office Directorate** following the departure of Jennifer Howells, (previous Director of Finance, Strategy & Transformation) on secondment.
7. Boryana Stambolova has been appointed Interim Director of Finance, heading up the new Finance, Corporate and Commercial Directorate, with the Strategy and Transformation Teams now joining the new Chief Executive Office Directorate.
8. Naomi Lee has joined as Head of Organisational Transformation
9. In December Clare Morgan joined as Director of Implementation and Partnership
10. On 9 January we will welcome Jonathan Benger, our new Chief Medical Officer (CMO)
11. Our new Chief People Officer will be joining us on 2 January, with an announcement to be made once their current organisation has notified staff.
12. **NICE’s recruitment processes are the current focus area of our workforce equality, diversity and inclusion plan**. New requirements include: mandatory training for hiring managers; a Black, Asian or minority ethnic interview panellist for all senior roles; interview feedback provided for interviewed but not appointed Black, Asian and minority ethnic candidates; and mandatory consideration of external candidates for posts longer than 3 months. From January, the focus of our EDI work will move to coaching, mentoring, and networking support, alongside equality training for staff.

Key risks

1. Our key strategic risks relate to external relevance and internal transformation.
2. Given NHS operational pressures and rapid innovation, to remain relevant, selection of the greatest impact topics and work on producing useful and usable advice must be a key transformation focus, and priority for the new substantive CMO.
3. While delivering on our substantial transformation ambition we are taking steps to engage our staff, to attract, develop and retain talent, and to continue to deliver our core business processes.

Conclusion

1. It has been a busy, exciting year for NICE. We have made progress in priority areas to focus on what matters most, produce useful and usable guidance, learn from data and implementation, and become an organisation as brilliant as the people in it. This work support our mission to bring the best care to patients fast, while delivering value for the taxpayer.
2. We would like to express our thanks and a Happy Christmas to all NICE staff, Committee members, and our key partners across the system.

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