National Institute for Health and Care Excellence

Centre for Health Technology Evaluation progress report

1. This report provides an update on key issues and developments in the Centre for Health Technology Evaluation in the period September and October 2020.

Summary of activity

We continued to implement our COVID-19 recovery plans for all health technology evaluation topics paused between March and June 2020.

90% of the Technology Appraisals topics paused due to COVID-19 have now been restarted or rescheduled, with 60% expected to publish in 2020/21. The remaining 40% are expected to publish in 2021/22.

Technology Appraisals are on track to publish 70 topics in the 2020/21 business year (with 30 TA's and 1 HST published to date).

The vacancy rate within the team of technical analysts and technical advisers has increased across the Centre which adversely impacts staff capacity in both the short and medium term. We are proactively considering and implementing creative approaches and solutions to recruitment.

Work on transformation projects in the context of CHTE2020 and NICE Connect progressed, focussing on methods, topic selection, committee operations, and implementation of the already agreed changes.

Preparations for the annual conference of HTA international 2021 in Manchester (<https://htai.eventsair.com/htai-manchester-2021-am/>) continued in earnest, with submission deadlines for abstracts in October and November 2020.

Notable issues and developments

Ongoing response to COVID-19

We held a first committee discussion to discuss exploratory economic modelling of SARS-CoV-2 viral detection point of care and serology tests, focusing on hospital settings. Final guidance is expected to publish in early January 2021. A committee discussion on testing is care homes and other residential settings is due to take place in December 2020.

Work to develop rapid Medtech Innovation Briefings (MIBs) on diagnostic tests for COVID-19 that have been approved through the Department of Health and Social Care's (DHSC) new test approval process is progressing. The recruitment of panel members is well underway and the team are holding regular meetings with colleagues at the DHSC to operationalise the process.

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 services are restoring at different rates. Virtual oversight meetings continue to be held with key stakeholders to monitor the impact of COVID-19 on the outputs of the agreements.

We continue to lead on the work of the RAPID-C19 oversight group, a multi-agency approach that enables safe and timely patient access to medicines showing evidence of benefit in treating symptomatic COVID-19 patients or for disease prevention. The Accelerated Access Collaborative secretariat, hosted by NICE, continues to support and coordinate wave 2 planning for the initiative. RAPID-C19 has been recognised by the Therapeutics task force at the DHSC as a valuable element for delivering treatments to patients with COVID-19.

Supporting innovation

NICE Scientific Advice provided advice to NHS England and NHS Improvement by conducting a gap analysis and make research recommendations on two diagnostic technologies, as part of the NHS Cancer Programme.

We initiated a joint programme of work with NHS England and NHS Improvement to revise and clarify guiding principles for managed access, which will provide a common understanding for the development of the Innovative Medicines Fund. This activity will consolidate lessons learned and use these insights to refresh our approach to this important programme, supporting earlier access to promising new treatments.

Staff in our centre worked with the MHRA to develop a new regulatory and access pathway for medicines. The new pathway is expected to be in operation from 1 January 2021, as part of the regulatory arrangements following the transition period for leaving the EU.

Digital technologies

Recruitment to the secretariat of the artificial intelligence (AI) Lab-funded multi-agency advice service project, hosted by NICE Scientific Advice for MHRA, CQC and HRA as partners, has completed and we are developing the plan for the discovery phase of the project, which includes stakeholder mapping, a survey to understand the users of the service, desk research to understand what content we already have across the partner organisations and a plan for qualitative interviews.

We provided a gap analysis and made research recommendations for 7 of the technologies selected for the AI in Health and Care award.

Transformation

A 6-week public consultation on the proposals for change to the CHTE topic selection processes started on 8 October and closes on 19 November 2020. A virtual engagement session was held with over 180 attendees on 22 October.

A 6-week public consultation on the principles for change to CHTE methods opened on 6 November, closing on 18 December 2020. During this period work will continue through a series of task and finish groups considering the methods framework and final implementation, broader impact and equality issues.

International collaboration

NICE International delivered a series of knowledge transfer seminars for the Colombian HTA agency, Instituto de Evaluacion y Tecnologias en Salud (IETS), to cover HTA and guidelines funded by Department for International Trade (DIT) Colombia. The team also ran a series of knowledge transfer sessions on HTA to the Central Government unit of the Philippines, as part of NICE's role in the Prosperity Fund, Better Health Programme (BHP).

NICE was an official partner of the World Evidence-based Healthcare day - on 20 October 2020 - which the NICE International team helped coordinate alongside 6 global partner institutions, led by JBI in Australia. The theme of the event was "from evidence to impact" where global organisations could share their experiences of how their work had contributed to impacts in health research, policy, practice, guidelines or patient outcomes.

Staff

Between September and October, 12 of 14 vacancies created were the result of internal promotions to teams within NICE. Recruitment campaigns are underway for all current vacancies. We will use flexible and creative solutions for recruitment into high turnover roles. This includes recruiting permanently into fixed term positions, and overrecruiting additional appointable candidates where appropriate.

Planning for the recruitment of the next cohort of Assistant Health Technology Analysts is also underway, and the team are exploring if this route provides a viable long-term feeder route for Band 7 Health Technology Assessment Analysts in the future. If so, the number of positions recruited into will be increased, from the previous cohort of 4 roles, to maximise the opportunity to support wider CHTE workforce development.

Figure 1 Performance against plan for non-guidance outputs in September and October 2020

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