Questions from the public: July 2021 board meeting

# What will be the challenges during this 5 years strategy? How will Covid-19 impact it? Which are the solutions you are implementing to improve efficiency?

The key challenge will be to deliver the ambitious strategy while also maintaining delivery of NICE’s existing activities. COVID-19 raises practical challenges around the development of guidance and raises the question of how staff will work in the future in terms of attending the office. A range of activities are underway to improve efficiency, including training staff in LEAN six sigma techniques, and introducing a requirement for centres and directorates to identify and deliver year on year efficiencies.

# The Government's recent Life Sciences Vision said the forthcoming consultation on the NICE methods and process review will be ambitious. However, we are hearing serious concerns from clients and patient groups that the review consultation due on 11 August will fall far short of expectations. What assurances can the Board give that the consultation will deliver on the high expectations raised within the industry and patient community?

The first consultation outlined NICE’s ambitions and this second consultation will look at proposals for how these can be delivered. The proposals are presented for consultation and this will be an opportunity for stakeholders to provide feedback before they are finalised.

# Will external members of the Task and Finish Groups be allowed to see the draft manual before it goes out to public consultation? If not, why not?

Yes.

# Please can we address/acknowledge the letter from the Charity Medicines Access Coalition (CMAC)? Stakeholders involved in the Task and Finish groups and Working Group on the Review are disappointed by poor involvement and no sight/comment on the conclusions from those groups. All want to help make the output of the Review the best it can be!

The Board acknowledges the letter received from the CMAC and the Chairman has offered to meet with the coalition to discuss their concerns. The task and finish groups have undertaken very important work to support the review, for which NICE is very grateful. The consultation documents will be shared with the groups prior to issue.

# Thank you for the update on the methods review timings. Can you confirm timelines for implementation following the publication of updated review?

The timelines for implementing the proposals are to be confirmed. Some aspects may be implemented more quickly than others given the impact on topics already in the work-plan.

# The Army was involved in the pandemic response - with track and trace, logistics support, vax centres, Nightingale hospitals. NICE do not traditionally include Armed Forces Medical/logistics support in guidelines. Is there a plan to include the Defence forces as backup for future ICS support? Do you work with JHubMed?

When NICE develops guidelines we consider who the guideline is for in the scope. For example, the scopes for both PTSD and rehabilitation after traumatic injury refer to military experience, settings and relevance to military personnel. NICE does not traditionally include logistic support. We have not worked with JHubMed.

# Can you comment on the Consultation for Black and brown women to be advised as formal guidelines to have inductions at 37 weeks?

The consultation the update of the inducing labour guideline has now closed. NICE is grateful for the comments received, which the committee will review and consider whether any amendments are required to the guideline’s recommendations before it is issued.

NICE stands with all those who are concerned about health inequalities and agree that their root causes must be addressed. Achieving this is beyond the scope of this specific guideline, but when revising the draft recommendations we will consider what else can be done to reduce inequalities in maternity settings.

# Is NICE continuing to be involved in the Innovative Medicines Fund proposals, following the announcement earlier today?

Yes, NICE is involved in this work and the Centre for Health Technology Evaluation are looking at how to operationalise NICE’s role.