

Accelerated Access Collaborative Board Meeting

Wednesday 22 March 2023

09:00 – 11:00

Chair:

Lord Darzi of Denham (Director of the Institute of Global Health Innovation, Imperial College London)

Board Members in attendance:

Rosalind Champion (Director of Office for Life Sciences)

Lucy Chappell (Chief Scientific Advisor, Department of Health and Social Care and Chief Executive Office, National Institute for Health and Care Research)

Peter Ellingworth (Chief Executive, Association of British HealthTech Industries (ABHI))

Tim Ferris (National Director of Transformation, NHS England)

Gary Ford (Chair, Academic Health Science Networks (AHSNs))

Sue Hill (Chief Scientific Officer, NHS England)

Ottoline Leyser (Chief Executive Officer, UK Research, and Innovation (UKRI))

Dan Mahony (Chair, UK BioIndustry Association (BIA))

Gail Marzetti (Director of Science, Research and Evidence, Department of Health and Social Care (DHSC))

Nicola Perrin (Chief Executive, Association of Medical Research Charities)

Amanda Pritchard (Chief Executive Officer, NHS England)

June Raine (Chief Executive, Medicines, and Healthcare products Regulatory Agency (MHRA))

John Stewart (National Director of Specialised Commissioning, NHS England)

Helen Stokes-Lampard (Chair, Academy of Medical Royal Colleges (AoMRC))

Richard Torbett (Chief Executive, Association of the British Pharmaceutical Industry (ABPI))

Matt Whitty (Chief Executive Officer, Accelerated Access Collaborative and Director of Innovation, Research and Life Sciences, NHS England)

Doris-Ann Williams (Chief Executive Officer, The British In Vitro Diagnostic Association (BIVDA))

Sarah Woolnough (Chief Executive Officer, Asthma UK and the British Lung Foundation; National Voices Representative)

Apologies received from the following Board Members:

Ottoline Leyser (Chief Executive Officer, UK Research, and Innovation (UKRI

Samantha Roberts (Chief Executive, National Institute for Health and Care Excellence (NICE))

Jacqui Rock (Chief Commercial Officer, NHS England)

Guest attendees/presenters:

Sarah Byron, (Programme Director for Centre for Health Tech Evaluation, National Institute for Health and Care Excellence (NICE)) *Deputising for Samantha Roberts*

Lindsey Hughes (Director of Research and Engagement, Accelerated Access Collaborative/NHS England)

John Iredale (Executive Chair, Medical Research Council (MRC)) *Deputising for Ottoline Leyser*

David Lawson (Director of Medical Technology, Department of Health and Social care (DHSC))

Richard Meddings (Chair, NHS England)

Roland Sinker (National Director of Innovation, Research and Life Sciences)

Jon Symonds (Non-Executive Director, Genomics England and Chair, GlaxoSmithKline (GSK))

Other attendees:

AAC Secretariat

Summary of agreed actions

#	Action	Owner	Due Date
1	Members to complete Declarations of Interest forms in line with the Board's terms of reference. An accurate register will be compiled before the June 2023 AAC Board meeting.	AAC Secretariat	June 2023
2	Board Members to share any specific comments on the paper to note with the AAC Secretariat.	Board Members	March 2023
3	For the AAC Board to receive and consider a paper on lessons learned from national adoption programmes, with specific reference to Inclsiran.	National Director of Transformation, NHS England	November 2023
4	For the AAC Board to receive the outcomes and recommendations of Lord O'Shaughnessy's review into clinical trials in the UK and consider any specific implications for the AAC.	Director of Office for Life Sciences and Chief Scientific Advisor, Department of Health and Social Care	November 2023

Note: These minutes are a summary record of the main points discussed at the meeting and any resolutions and/or other decisions made. They are not intended to provide a verbatim record of the Board's discussion.

1. Welcome and introductions

- 1.1 The Chair opened the meeting and welcomed all Board Members and other attendees present.
- 1.2 Apologies for absence alongside nominated deputies were noted from the following Board Members:
- Ottoline Leyser (Chief Executive Officer, UK Research, and Innovation (UKRI)) *John Iredale* (Executive Chair, Medical Research Council (MRC)) *deputising*
 - Samantha Roberts (Chief Executive, National Institute for Health and Care Excellence (NICE)) *Sarah Byron* (Programme Director for Centre for Health Tech Evaluation, NICE) *deputising*
 - Jacqui Rock (Chief Commercial Officer, NHS England)
- 1.3 The following guest attendees were introduced to the meeting:
- Lindsey Hughes (Director of Research and Engagement, Innovation, Research and Life Sciences, NHS England)
 - David Lawson (Director of Medical Technology, Department of Health and Social care (DHSC))
 - Richard Meddings (Chair, NHS England)
 - Roland Sinker (National Director of Innovation, Research and Life Sciences)
 - Jon Symonds (Non-Executive Director, Genomics England and Chair, GlaxoSmithKline (GSK))
- 1.4 There were no conflicts of interest declared at the meeting.
- 1.5 The Chair advised Board members the annual declarations of interests process was due to commence shortly and requested members' cooperation.
- 1.6 The paper, **HealthTech Innovation Pathway Mapping Update**, had been circulated for the Board to note. It was agreed that Board Members would direct any specific comments or queries to the AAC Secretariat.

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2. Review of previous minutes and actions from the meeting held on 22 November 2022

- 2.1. The minutes of the previous meeting held on 22 November 2022 were agreed as an accurate record, with no amendments identified.
- 2.2. The AAC Chief Executive highlighted the following action update from the previous meeting.
 - Provide details and timing for inclusion of research enrolment as part of the NHS App. *A link from the NHS App to NIHR's National Volunteer Registry, Be Part of Research went live in February 2023. By 20 March, over 41,500 patients had completed the registration process.*
- 2.3. This action was closed.
- 2.4. Updates on all other actions from November 2022 were provided. These actions were not yet due for completion and were retained on the Board's action log.

3. AAC CEO UPDATE

- 3.1. The AAC Chief Executive presented the report, specifically highlighting the following areas:
 - The success of the NHS Innovation Showcase and Clinical Entrepreneurs Programme Big Pitch Event, which marked the NHS' 75th birthday.
 - The latest impact data showed continued strong uptake for technologies included in the MedTech Funding Mandate across the different years of support.
 - The continued focus towards addressing Health Inequalities, and the launch of the Innovation for Health Inequalities Programme (InHIP).
- 3.2. Several discussion points were raised by Board Members, including:
 - System actions to recognise and promote the significant level of activity and support across the innovation landscape and AAC priority areas.
 - Continuing to build on the joint approach for prioritising and scaling innovations, including the important lessons arising from the COVID pandemic.
 - Both responding to and creating clinical demand for innovation.
 - The importance of commissioning, specifically at a local level, in embedding innovations, alongside efficient decommissioning of poor value treatments, technologies and services.
 - The role and function of Academic Health Science Networks (AHSNs) across the innovation landscape.

- Supporting the future and evolving role of Integrated Care Boards (ICBs) as commissioners of innovation and the focal points of local ecosystems.

3.3. Members expressed general support for future collaboration and alignment on commissioning and selecting innovations through an established and continuously improving process.

4. NHS AS AN INNOVATION PARTNER

4.1. The AAC Chief Executive introduced the paper, noting it follows a paper discussed at the November 2022 meeting. The paper highlighted several areas of progress since the previous Board meeting, which evidenced the strength of partnership working between AAC Partners. Specific areas highlighted included:

- The NICE launch of Early Value Assessments (EVAs)
- The pathways work for MedTech and medicines
- The collaboration of key commissions, link in national work
- Joint working on data-sharing and the horizon scanning processes.

4.2. The National Director of Innovation, Research and Life Sciences supported the item and noted the following priority areas and actions:

- Alignment of the UK innovation ecosystem around 3-5 key pathways
- Rearticulation of Life Science Vision and NHS involvement in the blueprint for delivery
- Future governance arrangements to support the programmes of activity over the cycle of the next three Life Science Council meetings – i.e. to May 2024.

4.3. Board Members were supportive of the approach and proposals outlined in the paper, positively acknowledging the involvement of the National Director of Innovation, Research and Life Sciences. Reflections from Members included:

- Discussions on accountability arrangements and the delegated authority of the delivery system.
- The need for a stronger sense of solid commitments and actions associated within the paper.
- Wider NHS and staff involvement, with further front line infrastructure alignment through collaboration with teaching hospitals.
- Recognising the commitment of AAC partners in supporting and promoting the UK innovation system, alongside the significant challenges outlined in the paper.

- Specific references to lessons learned around the adoption and spread of Inclisiran and the current voluntary scheme for branded medicines pricing and access (VPAS) negotiations.

4.4. Discussion on lessons learned from national adoption programmes with specific reference to Inclisiran continued and it was agreed that the Director of Transformation (NHSE) would collate available information and analysis and present this to a future AAC Board meeting for consideration and discussion.

4.5. The Board:

- (a) Noted the progress on delivering the improvements to the access system discussed at the AAC board in November 2022 and the planned next steps, as set out in the paper.
- (b) Supported the planned piece of work to mobilise the UK’s health research and innovation ecosystem behind the NHS and Governments key clinical priority areas, as set out in the paper.
- (c) Agreed to receive a paper from the Director of Transformation (NHSE) on lessons learned from Inclisiran at a future meeting.

4.6. The Chair thanked Board Members for their comments, the rich discussion and support for the proposals outlined in the paper.

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5. THE GOVERNMENT’S MEDTECH STRATEGY

5.1. The Director of Medical Technology (DHSC) presented a paper that introduced the Government’s medical technology strategy (published in February 2023). This sets out a vision of right product, right price, right place and identifies four areas of priority, including creating clear, streamlined pathways for innovation.

5.2. The paper highlighted that work is underway to develop and publish an implementation plan by June 2023. It was acknowledged that a range of initiatives are already in place that strongly align with the new strategy, including the NHS Innovation Service and Commercial

Innovation Pipeline. It was emphasised that the plan was to build on, rather than duplicate existing work, to further simplify a complex process and seek to address the recurrent challenge from industry around reimbursement. The Secretary of State challenge to the system around the rapid adoption of target products was also recognised.

5.3. Subject to agreement, the AAC had provisionally been assigned to lead on enabling an end-to-end innovation pipeline, from regulation, assessment, reimbursement, through to commercialisation.

5.4. As part of the introduction, summary points were also highlighted, including:

- The approach to ensuring effective utilisation of MedTech devices.
- Minimising duplication through the AAC leading on an end-to-end innovation pipeline.
- Increasing understanding and awareness of medical technology among clinicians, to inform purchasing and subsequently promote adoption and spread.
- Building collaboration around the Life Sciences Vision.

5.5. Board Members were supportive of the paper, accompanying strategy and asks of the Board. Member discussion centred around the following points:

- Possibility of reviewing funding of MedTech innovations, including the notion of a single funding pot to target and focus on technologies with the biggest potential impact.
- Risks associated with not considering lessons learned from national adoption programmes, such as Inclisiran.
- The connection with the previously discussed agenda item and work associated with the NHS as an Innovation Partner (agenda item 4).
- Early consideration of adoption in research and maintaining the momentum into latter stages, including regulation and pathway change.

5.6. The Board:

- (a) Endorsed the proposal for the AAC to be the implementation lead for the end-to-end innovation pipeline initiative, as part of the proposed MedTech strategy implementation plan.
- (b) Supported the recommendation to establish a joint industry working group under the Health Technology Partnership to develop early proposals to improve the reimbursement process for innovation.

5.7. The Chair thanked the Director of Medical Technology (DHSC) for his attendance and presentation of the paper. The Chair also thanked Board Members for their comments and support for the outlined proposals.

6. INDEPENDENT REVIEW INTO CLINICAL TRIALS IN THE UK

6.1. The Director of Office for Life Sciences (OLS) provided a verbal update and position statement on the review into the UK commercial clinical trials landscape, being undertaken by the appointed Minister, Lord James O'Shaughnessy. The key points highlighted included:

- Confirmation this was an independent review that had not yet concluded
- Engagement activity had included individual stakeholder discussions and a series of online workshops
- Next steps included drafting of the report and testing the proposals, prior to publication of the report
- Confirmation OLS had been supporting Lord O'Shaughnessy's work by providing secretariat capacity.

6.2. The Chief Scientific Advisor, Department of Health and Social Care supported the item, sharing monthly reporting status on clinical research figures and committed to bringing a future update to the Board. The details shared showed positive signs of recovery across the research landscape and activity.

6.3. Board Members were keen to see the outcomes and recommendations of the independent review, emphasising the critical importance of clinical trials in enhancing and improving the quality of care and they should be considered as such.

6.4. The following activities were highlighted and suggested as part of the discussion:

- Assessing clinical trials capacity and utilisation to support prioritisation
- Effective campaigning and sharing the successes of clinical trials and innovation across the NHS more generally
- Establishing and maintaining research as a core element, embedded into clinical pathways.

6.5. The Chair thanked the Director of Office for Life Sciences and Chief Scientific Advisor, Department of Health and Social Care for the verbal updates provided.

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7. CLOSE OF THE MEETING

7.1. Prior to the close of the meeting, the Chief Executive Officer, The British In Vitro Diagnostic Association shared with other Board members the success of a recent in vitro diagnostic device (IVD) early value assessment (EVA) that considered the first genomic point of need test for detecting a relatively common genetic marker to guide antibiotic use to prevent hearing loss in babies. NHS England’s Chief Scientific Officer highlighted the learning for the future that had been captured through this first NICE assessment; and the need to link the process with implementation and funding plans.

7.2. The Chair thanked the Board and attendees for their contributions and closed the meeting.

Date of the next AAC Board meeting: Wednesday, 21 June 2023