

Accelerated Access Collaborative Board Meeting: Minutes

Wednesday 26 June 2019 11:00 – 13:00	
Attendees:	
<p><u>Chair</u></p> <p>Professor Lord Darzi of Denham OM KBE PC FRS (Director of the Institute of Global Health Innovation, Imperial College London)</p> <p><u>Board members</u></p> <p>Simon Stevens (Chief Executive Officer, NHS England & Improvement)</p> <p>Meindert Boysen (Director, Centre for Health Technology Evaluation, NICE), deputising for Sir Andrew Dillon, Chief Executive Officer, NICE</p> <p>Dr Krishna Prasad (Clinical Assessor, MHRA), deputising for Dr Ian Hudson, Chief Executive Officer, MHRA</p> <p>Dr Seamus O'Neill (National Chair of the Academic Health Science Network)</p> <p>Haseeb Ahmad (President, Association of the British Pharmaceutical Industry)</p> <p>Hilary Newiss (Chair, National Voices)</p> <p>Tamsin Berry (Director, Office for Life Sciences, DHSC), deputising for Prof. Chris Whitty, Chief Scientific Adviser, Department of Health and Social Care (DHSC)</p> <p>Aisling Burnand MBE (Chief Executive Officer, Association of Medical Research Charities AMRC)</p> <p>Tara Donnelly (Chief Digital Officer, NHSX) deputising for Matthew Gould, Chief Executive, NHSX</p>	<p>Neil Mesher (Board Member, Association of British Healthcare Industries)</p> <p>Dr Rhydian Phillips (Director of System Improvement, NHS England & NHS Improvement), deputising for Hugh McCaughey, National Director of Improvement, NHS England & Improvement</p> <p>John Stewart (National Director of Specialised Commissioning, NHS England & NHS Improvement)</p> <p>Dr Sam Roberts (Chief Executive Officer, Accelerated Access Collaborative and Director of Innovation and Research, NHS England & NHS Improvement)</p> <p><u>Other attendees</u></p> <p>Steve Bates (Chief Executive Officer, UK Bioindustry Association)</p> <p>Anna Dijkstra (NHS England & NHS Improvement)</p> <p>Roxanne Smith (Deputy Director, Office for Life Sciences, DHSC)</p> <p>Emma Hanmore (Head of Performance and Evaluation, Innovation, Research and Life Sciences Group, NHS England & NHS Improvement)</p> <p>Eleanor Angwin (Senior Policy Advisor, Office for Life Sciences, DHSC)</p> <p>Private secretary and Chief Scientific Advisor to Lord Darzi</p> <p>AAC Secretariat</p>

Apologies:

Sir Andrew Dillon (Chief Executive Officer, NICE)

Dr Ian Hudson (Chief Executive Officer, MHRA)

Matthew Gould (Chief Executive, NHSX)

Prof Chris Whitty (Chief Scientific Adviser, DHSC)

These notes are a summary record of the main points discussed at the meeting and the decisions made. They are not intended to provide a verbatim record of the Board's discussion.

1. Welcome and introductions

1.1. Lord Darzi welcomed NHSX to the Accelerated Access Collaborative (AAC), and noted that Steve Bates was attending as an observer on behalf of the UK Bioindustry Association

2. Declarations of interest

2.1. The previously declared interests already recorded on the register were noted, and it was confirmed there were no conflicts of interest that required members to be excluded from the meeting.

3. Review of minutes from the previous meeting

3.1. The board approved the content of the minutes and noted that all actions were completed or ongoing.

4. AAC Remit

4.1. Sam Roberts presented a paper on the role of the boosted AAC. She advised that in April 2018, the Secretary of State requested that the AAC expand its remit. In addition to identifying specific products to support through accelerated regulatory approval and/or uptake, he asked the AAC to tackle some of the more fundamental challenges in the innovation ecosystem. The paper summarised the 6 priority areas of the innovation ecosystem, initial proposals on what the AAC should deliver in the next 12 months, and how governance of the AAC should be updated to reflect this expanded remit.

4.2. The board noted the expanded remit of the AAC.

4.3. The board members requested an update on involvement of the devolved administrations with the AAC at the next board meeting.

Action: Sam Roberts

4.4. The board members welcomed the flexibility on the selection criteria for early stage products and noted that it would drive the AACs new functionality. The board also acknowledged some key challenges with the expanded remit, including application of NICEs methods, commercial negotiations and supporting adoption.

- 4.5. The board noted the AAC's focus on horizon scanning and recognised the importance of alignment with commitments for horizon scanning in the 2019 Voluntary Scheme for Branded Medicines Pricing and Access. Sam Roberts confirmed that a joint horizon scanning platform was being developed which will be accessible by all partners.
- 4.6. Sam Roberts presented the updated terms of reference and highlighted that the board will hold 3 meetings each year and may conduct some of its business in private when this would be prejudicial to the public interest due to the confidential nature of the discussions. She proposed that the minutes and papers from the board's open discussions will be published, following approval by the collaborative, but will need to respect commercial confidentiality. It was agreed that the Terms of Reference should include a regular review, to ensure the board and any subcommittees are functioning as effectively as possible. Therefore, the Terms of Reference shall be modified as follows:
- 4.7. These Terms of Reference will be reviewed periodically (annually at a minimum) to take into account any evolution of the mandate and governance of the AAC. This will include a review of the membership to ensure it is aligned with the needs of the board and may also include a review of other oversight groups supporting innovation in the UK, including sub-committees of the AAC board. This governance review may be conducted internally or with external assistance, at the discretion of the Chair.

Action: Sam Roberts

- 4.8. The board members approved the updated terms of reference.
- 4.9. The board members agreed the key deliverables for the AAC for the next 12 months. It was noted that the level of ambition was appropriate. It was agreed that a communications strategy should also be included in plans and brought to a future board meeting.

Action: Sam Roberts

5. Measurement of AAC's Impact

- 5.1. Emma Hanmore presented a paper on measuring the impact of the AAC, which summarised the three levels of measurement: how 'pro-innovation' England is as a country, the AAC's contribution to this national picture, and the rapid uptake products' contribution to the AAC. The paper proposed an interim approach to commencing this measurement, as well as a longer-term programme of work to align and improve measurement of the innovation ecosystem.
- 5.2. Emma provided a demonstration of the interactive AAC scorecard which will be used to monitor and demonstrate the impact of the AAC. It included a range of measures that can be substantially and directly affected by AAC programmes.
- 5.3. The board approved the interim approach to measuring the impact of the AAC and agreed to consider the longer-term approach to aligning measurement of innovation at the first AAC Board meeting of 2020.
- 5.4. The board agreed that the interactive AAC scorecard would be useful externally – to aid transparency, provide information and inform communications about what the AAC is doing. The board acknowledged that there may be some issues around commercially sensitive information and agreed that categories of products should be referred to rather than individual products.

Action: Emma Hanmore

5.5. The board queried whether it was possible to include information on barriers to adoption in order to aid learning.

Action: Emma Hanmore

5.6. It was highlighted that some data on jobs generated could be attributed to the AAC. Some additional data sources for measures of innovation not directly attributable to the AAC were also suggested – including the Medicines Health Regulation Agency for data on regulatory approval and UK Research and Innovation for data on participation.

Action: Emma Hanmore

5.7. The board noted the importance of aligning measures with other policy areas, for example the Life Sciences Industrial Strategy and Cell and Gene Catapult.

5.8. The board noted the importance of understanding whether stakeholders have seen a difference in how innovation is handled.

6. Identification of early stage products (private business)

7. Any other business

7.1. None