

Submission from the National Institute for Health and Care Excellence (NICE) to the Health and Social Care Select Committee inquiry into managing the coronavirus outbreak

July 2020

Introduction

The National Institute for Health and Care Excellence (NICE) is the independent organisation responsible for providing evidence-based guidance on health and social care in England. NICE guidance, standards and other resources help health and public health professionals, and social care practitioners, to deliver the best possible care within the resources available.

NICE is taking this opportunity to supply information to the committee about our role in supporting the health and care system to manage the coronavirus outbreak. This has involved changing the way we work and doing so rapidly to produce guidance to support the health and care system.

Our response to the COVID-19 pandemic has covered all our programmes. Key activities have been:

- producing clinical guidelines
- working with system partners to enable safe and timely patient access to medicines showing evidence of benefit
- guidance and advice to support diagnostics and testing
- medical and digital technologies
- using data and analytics
- international collaboration
- communicating with our audiences and stakeholders

Responding to the COVID-19 pandemic

Our immediate response to the pandemic involved several steps:

- Deciding which guidelines to publish was led by whether they were therapeutically critical and/or addressed COVID-19 diagnostic or therapeutic interventions
- Changing meetings into videoconferences to protect vulnerable or self-isolating lay members
- Releasing frontline staff from committees and panels so that they could support clinical care

NICE COVID-19 rapid guidelines

NHSE England (NHSE) and NHS Improvement (NHSI) referred a series of rapid guidelines on COVID-19 topics to us. They constitute the heart of our response to the pandemic.

The COVID-19 rapid guidelines have been produced using an interim methods and process with the collaboration of a cross-specialty clinical group which drew on specialist societies, royal colleges and NHSE and NHSI.

Between 13 March and 27 July we produced 21 pieces of guidance on a range of topics and made 46 updates to recommendations as practice, evidence and policy evolved and in

response to stakeholder feedback. The list of guidelines as of 27 July can be found in the appendix to this document.

We have continued to support, contribute to, and learn from international efforts such as the Evidence Collaborative for COVID-19 established by the World Health Organization. Doing so ensures our rapid guidelines draw on and contribute to international evidence to inform the best approach to the COVID-19 pandemic.

Rapid evidence summaries

In addition, we have been producing rapid evidence summaries on medicines used to manage COVID-19 or its symptoms. We have produced reviews on:

- short term use of non-steroidal anti-inflammatory drugs (NSAIDs) for acute viral respiratory infection
- anakinra for COVID-19 associated secondary haemophagocytic lymphohistiocytosis
- angiotensin-converting enzyme inhibitors (ACEIs) or angiotensin receptor blockers (ARBs) in people with or at risk of COVID-19
- long-term use of NSAIDs for people with or at risk of COVID-19
- remdesivir for treating hospitalised patients with suspected or confirmed COVID-19
- vitamin D for COVID-19

Medtech innovation briefings

We have published briefings on innovative medical technologies that have been identified as being potentially useful during the COVID-19 pandemic:

- CFHealthHub for managing cystic fibrosis during the COVID-19 pandemic
- Cytokine adsorption devices for treating respiratory failure in people with COVID-19
- Lifelight First for monitoring vital signs
- myCOPD for self-management of chronic obstructive pulmonary disease.

Medicines: access and evidence

The NICE scientific advice team has published on the NICE website a guide to evidence collection for medicines to prevent or treat COVID-19, in partnership with the National Institute for Health Research (NIHR).

The guide aims to set out best practice for conducting research whilst being mindful of the challenges associated with this during the COVID-19 pandemic.

NICE is a partner in a multi-agency initiative, called the Research to Access Pathway for Investigational Drugs for COVID-19 (RAPID-C19), to enable safe and timely patient access to medicines showing evidence of benefit in treating symptomatic COVID-19 patients.

The RAPID-C19 approach identifies and prioritises technologies currently in research with most promising signals for rapid regulatory consideration and interim clinical policy development. Technologies will continue to collect data to support licensing and market access approval as needed whilst in use.

Other partners include the Medicines and Healthcare products Regulatory Agency (MHRA), NHS England and the NIHR and spans the pathway from horizon scanning, topic selection,

regulatory approval, market access and commissioning in a streamlined and coordinated manner.

Diagnostics, testing and medical and digital technologies

We have published an evidence standards framework for diagnostic testing for SARS-CoV-2 and anti-SARS-CoV-2 antibodies. This sets out a framework to inform and support the collection of the best possible data and evidence while tests are developed and validated at speed during the pandemic. The framework is supported by the Deputy Director of the COVID-19 Testing Programme at NHS England and NHS Improvement.

The Diagnostics Assessment Programme (DAP) is also responding to a request from NHS England and NHS Improvement by producing exploratory economic modelling of use cases for point-of-care SARS-CoV-2 viral detection and serology tests. The modelling will contribute to management of the pandemic by highlighting key areas for further data collection and will be carried out on target product profiles rather than specific products. The exploratory modelling will mean that when tests are being considered for national adoption, we will be able to rapidly update the models and give guidance on cost-effectiveness as swiftly as possible.

The NICE scientific advice team has been offering free fast-track scientific advice to developers of products for COVID-19 and has completed six engagements with medical technology companies, the majority of which involved an element relating to diagnosis or triage.

International collaboration

With the COVID-19 pandemic, there are substantial efforts worldwide to develop rapid evidence-based reviews and guidance to help inform decision making across clinicians, policy makers and the public.

Since April, NICE staff have been actively engaged in collaborative opportunities being coordinated by the World Health Organisation (the Evidence Collaborative for COVID-19 [ECC-19]), the Cochrane Collaboration and the International Network of Agencies for Health Technology Assessment (INAHTA).

New initiatives continue to emerge that aim to increase coordinate and reduce duplication among national bodies that are reviewing evidence and developing rapid guidelines on the management of COVID-19. These include the COVID-19 Evidence Network to support Decision-Making (COVID-END) hosted by McMaster University; a new collaboration initiated by NICE between the Canadian Agency for Drugs and Technologies in Health (CADTH), the Australian Pharmaceutical Benefits Advisory Committee (PBAC) and the Scottish Medicines Consortium (SMC) to share experiences of COVID-19 responses and explore sharing resources in relation to rapid health technology assessments; and the work being coordinated by the European Network for Health Technology Assessment (EUnetHTA).

On 28 May NICE International hosted a webinar for our international stakeholders on the NICE response to the pandemic.

Through participation in these various initiatives, NICE has an opportunity to contribute to, and benefit from international efforts to identify, analyse and synthesise rapidly emerging evidence on the prevention, diagnosis and treatment of COVID-19.

Our ongoing response

NICE's support for the COVID-19 response is wide-ranging, using the organisation's core skills, knowledge and relationships to add value. These have been brought together in a highly effective way with teams collaborating to focus on the needs of the system. We will continue to adapt and respond as the immediate COVID-19 emergency transitions to an endemic disease affecting clinical and social care and public health and new ways of delivering services.

Appendix: published COVID-19 rapid guidelines (July 2020)

Managing symptoms and complications:

Acute kidney injury in hospital - NG175

Acute myocardial injury - NG171

Antibiotics for pneumonia in adults in hospital - NG173

Critical care in adults - NG159

Managing suspected or confirmed pneumonia in adults in the community - NG165

Managing symptoms (including at the end of life) in the community - NG163

Managing conditions that increase risk:

Children and young people who are immunocompromised - NG174

Chronic kidney disease - NG176

Community-based care of patients with chronic obstructive pulmonary disease (COPD) - NG168

Cystic fibrosis - NG170

Dermatological conditions treated with drugs affecting the immune response - NG169

Gastrointestinal and liver conditions treated with drugs affecting the immune response - NG172

Interstitial lung disease - NG177

Rheumatological autoimmune, inflammatory and metabolic bone disorders - NG167

Severe asthma - NG166.

Providing services during the pandemic:

Delivery of radiotherapy - NG162

Delivery of systemic anticancer treatments - NG161

Dialysis service delivery - NG160

Haematopoietic stem cell transplantation - NG164

Renal transplantation - NG178

Arranging planned care in hospitals and diagnostic services – NG179