

Integrated performance report

April 2023

NICE National Institute for
Health and Care Excellence



Summary

Area	Confidence in achieving targets at year end	Comments
Transformation		The business plan priorities on early value assessment of medtech (EVA) and proportionate approach to technology appraisal (PATT) are rated green: EVA is being adopted into business as usual and PATT is estimated to have increased capacity in the TA programme by 17% for 23/24 which is greater than current demand in the pipeline. Digital living guidelines is reporting an amber/red low confidence rating due to the achieved outcomes being more modest than the original ambition. The fourth priority, transforming the way we work, is amber due to earlier capacity challenges in deploying a new IT helpdesk solution.
Core advice and guidance		In addition to the work on NICE's transformation, the guidelines, and technology appraisal and highly specialised technologies programmes exceeded the planned level of outputs set out in the business plan. The number of medical technologies and diagnostics guidance and medtech innovation briefings was lower than set out in the business plan (partly due to the topic pipelines). Quality standards outputs were also behind plan.
Timely access to new technologies		4 of the 6 targets for enabling timely access to new technologies through our TA and HST programmes were met, with another only 1% below target. These indicators will be replaced with a new measure for 2023/24 to provide a more transparent view of performance.
Supporting implementation and adoption of our guidance		Both indicators were met. New measures will be reported in 2023/24 to provide better insight into the uptake of NICE guidance.
Communications		3 of the 6 targets were met, including the proportion of media coverage that is positive and meeting the deadline for responding to parliamentary questions. Response times to enquiries has been consistently met since September but narrowly missed the target for the year overall. Of the 154 freedom of information requests 149 were responded to within target in 2022/23, but the overall target was not met.
People		Sickness absence reduced each month from August but remains higher than the start of the financial year, with stress the highest cause of absence. Staff turnover has reduced but remains an area of focus with improved analysis of exit data planned. Long standing vacant posts have now been removed as part of the establishment control and budget setting process and the vacancy rate is now below plan.
Finance		NICE ended the year with an underlying underspend of £0.4m, meeting our statutory duties. However, following the agreement of a non-consolidated pay award for 2022-23 in March-April'23, we were asked to accrue for the impact of the pay award (£2.15m), which resulted in an overspend against budget of £1.8m. DHSC have committed to provide budget cover for the overspend.

Transformation

1 April 2022 to 31 March 2023

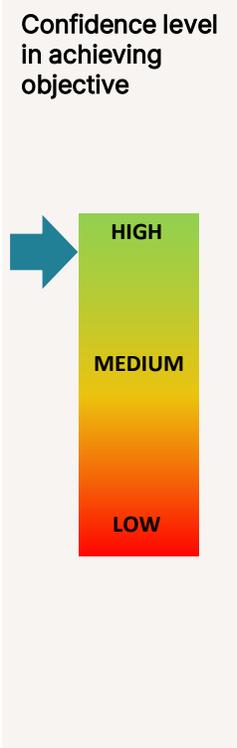
Transformation Progress – April 2023 (Slide 1 of 4)

1 Focus on what matters most

Innovative methods

Proportionate Approach to TA Evaluation

Expanding our capacity for technology appraisal guidance for medicines by 20% through developing a more proportionate approach



What's been achieved

The latest estimates are for a 17% increase in capacity for 23/24 - greater than the current pipeline demand.

Readiness for implementation has been finalised, enabling the proportionate approach to go live as BAU activity on 24 April. Two streamlined cost comparison appraisals (a slimmed down appraisal for similar medicines) started during that week. External stakeholders have been engaged in this new process and understand what is needed. Internal colleagues are being supported by the change champions.

Targeted implementation comms to teams is underway with updates being provided to all teams involved in appraisals and directing them to an implementation library of knowledge. Internal and external comms have also been undertaken.

The HTA Lab explored options for rapid entry to managed access but was constrained by external stakeholder requirements (e.g. ICER ranges). It then tested a streamlined approach to managed access, by re-running a previously recommended topic. This process proved successful and plans are now in place for this approach to be taken forward within BAU.

Key risks and challenges

Allocating work to contracts to create the pathway model for non-small-cell lung cancer (NSCLC) has been delayed. Some of our contractual arrangements do not allow us to own the models, others may allow this but they have limited capacity.

We are exploring all options including reallocation of EAC work, discussing what involvement can be reasonably expected if work cannot be reallocated and exploring a reciprocal arrangement with NICE Guideline health economists to bring this work in house.

Team sickness has put a strain on implementation plans, however, the team has contingencies in place and plans are progressing.

What we have learnt

Stakeholder engagement feedback has indicated that the PATT project has been well received. Workshops with the EAGs and internal teams has provided insightful feedback and quick wins.

This informed our future approach, especially how to best schedule topics in real-time and will inform part of a review for TA scheduling.

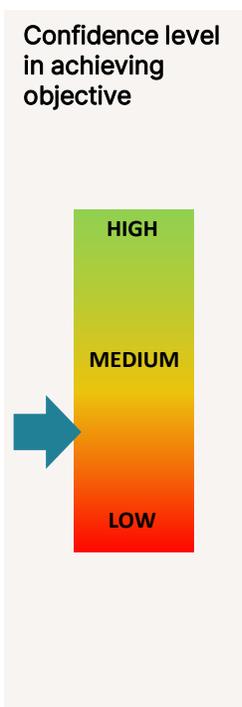
Key performance indicator for 22/23 (from business plan)		Status
3 INDICATORS	HTA Lab approach trialled on at least 2 innovative, complex topics	Achieved
	Proportionate approach piloted	Achieved
	Proportionate (HTA Lab, conventional TA and simpler, faster approach) fully implementable from April 2023, providing a 20% increase in capacity to undertake TAs in 23/24	Partially achieved (17% increase in capacity)

2 Create advice that's useful and useable

Product innovation

Digital Living Guideline Recommendation

Improving the usefulness and usability of our guidelines by publishing digital living guideline recommendations for breast cancer, with a new model of support for adoption of best practice



What's been achieved

Priority is reporting an amber/red low confidence rating, due to the outcomes achieved being more modest than the original ambition. The objectives for operating model have not been achieved due to challenges in reaching alignment.

Workstream 1 – Learnings from content & digital work stream now transitioning into the planning phase of Digital Presence with three key areas; 1) Product & channel strategy 2) Component Content Management System (CCMS) for guidance content 3) Improve website (CMS)

Workstream 2 Pilot 1 - Breast Cancer: Evaluation of results from three projects. Artificial Intelligence (AI) surveillance tool outputs ratified with breast cancer experts. This learning will be explored, tested and adopted appropriately as part of process simplification in 23/24.

Workstream 2 Pilot 2 - Women's Health and Diabetes: Interim principles for methods and processes for delivering digital living guideline recommendations developed. Now moving into planning for implementation of improvements to our methods and processes across the entire guidelines programme, which is part of process simplification in 23/24 business plan objective.

Workstream 4 - Implementation plan in place for arm mobility recommendations. Measurement of breast cancer recommendations and learning report delivered.

Key risks and challenges

Operating Model work has stalled due to challenges in achieving alignment on the model. We will approach this area with new focus in 23/24 as part of the Centre for Guidelines directorate plan

What we have learnt

The support of all parties is vital to delivering changes related to the operating model. This has been included as part of the directorate delivery plan.

Key performance indicator for 22/23 (from business plan)		Status
3 INDICATORS	Interactive, digital living guideline recommendations on the breast cancer topic published on NICE website via a proof-of-concept platform	Achieved Published on internal platform
	Deliver a bespoke implementation approach in partnership with national organisations, including a measurement framework	In progress
	Organisational design to support the target operating model signed off for phased implementation	Moved into 23/24

2 Create advice that's useful and useable

Streamlined advice by topic

MedTech EVA

Actively drawing in medical devices, diagnostics and digital products that address national unmet needs and providing quicker assessments of early value to identify the most promising technologies conditional on further evidence generation

Confidence level in achieving objective



What's been achieved

10 medtech topics have launched (KPI achieved).

4 publications now achieved – children and young people mental health, CariHeart (cardiac risk prediction), Proknow and Genedrive. These were 4 of 5 medtech topics that achieved publication by 31 March.

The fifth (Kardiamobile) is also ready for publishing, but has been delayed due to external DTAC requirements.

Completion of first draft evidence generation plan – children and young people.

Topic intelligence briefings have taken place for mental health and social care technologies.

Resource plans within medtech and evidence generation complete and being implemented.

Transition plan for adoption of EVA within BAU being taken forward.

Key risks and challenges

Stakeholder expectations – requirements such as Digital Technology Assessment Criteria (DTAC) and CE marking are impacting progress of topics to publication.

Evidence generation plans have been impacted by stakeholder engagement that has taken longer than anticipated – activity underway to recover.

What we have learnt

Need to clarify NICE's role and respective partnership roles to maximise progress and impact – continuing to build on relationships to identify clear roles, increase efficiency and reduce duplication.

As part of the committee process, we will seek to gain greater clarity on evidence gaps and the rationale for their importance to better support creation of evidence generation plans.

Key performance indicator for 22/23 (from business plan)

Status

10 medtech products (at least 6 of which will be digital) assessed

Achieved

5 products have published guidance

In progress (4 of 5)

Data collection workshops held and evidence generation plans developed for 60% of products that are conditionally recommended

In progress

Methods and resourcing in place to extend medtech early value assessment to all medtech in 23/24

Achieved

4 INDICATORS

Transformation Progress – April 2023 (Slide 4 of 4)

4 To be an organisation as brilliant as the people in it

Behaviours, Processes and Technology

Confidence level in achieving objective

What's been achieved

Continue to report an amber status due to earlier capacity challenges in deploying new helpdesk solution. This was replanned to fully launch in May 2023. Delay in development work by Civica relating to Trac committee recruitment. Development work since completed, with a few amendments required prior to rollout, which is expected by June 2023.

Two of the three teams within the People and Places directorate have been migrated to SharePoint, the first directorate to use the Our Space service.

98% of managers are enrolled on the management development course. Refreshed NICE values have now been embedded in future cohorts. Planning for phase two of the management development offer for 23/24 is complete.

Implementation of formal hybrid working progressing and to be implemented by May 2023.

5 year transformation plan agreed by the Board March 2023.

Key risks and challenges

Staff feedback confirmed it is still unclear when managers can direct staff to attend the office as part of hybrid working – further clarification being provided through April 2023.

Civica unable to commit to exact date for TRAC amendments which could delay roll out further. However, they have provided verbal reassurances that this could be achieved.

What we have learnt

We need to be clearer and use plain language when migrating future directorates to Our Space as part of Digital Workplace.

Work with software developers needs to factor in their development approach, as their timeframe to deliver is reliant on their capacity and planning. This needs to be factored into project delivery timescales.

Transforming the way we work

Transformation of the way we work, including our technology, processes and behaviours

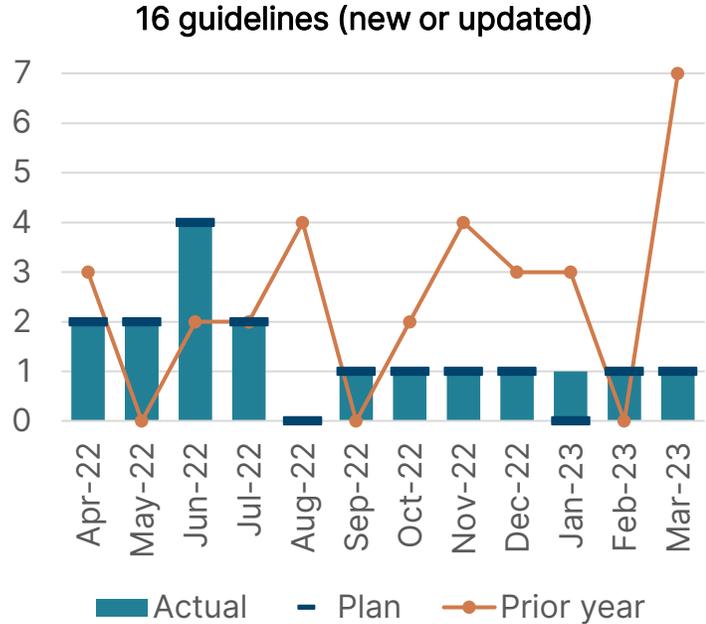
Key performance indicator for 22/23 (from business plan)	Status
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<p>11 INDICATORS</p>	Formal hybrid working introduced	Delayed until May 2023
	Leadership/management development training rolled out	Achieved
	Process improvement for consultation comments rolled out if pilot successful	Achieved
	OneDrive rolled out as part of My Space service	Achieved
	SharePoint established as the main platform for document management in at least 1 directorate	Achieved
	Priority objective projects are using Project Spaces as a service to support consistent standards and collaboration	Achieved
	Fully integrated IT service desk is in place	Delayed until May 2023
	AV/VC installed and working across the NICE estate	Achieved
	Digital committee recruitment tool rolled out if pilot successful	Delayed until June 2023
	Target culture defined	Achieved
	3-5 year roadmap for target culture and organisation-wide transformation approach produced	Achieved

Core advice and guidance

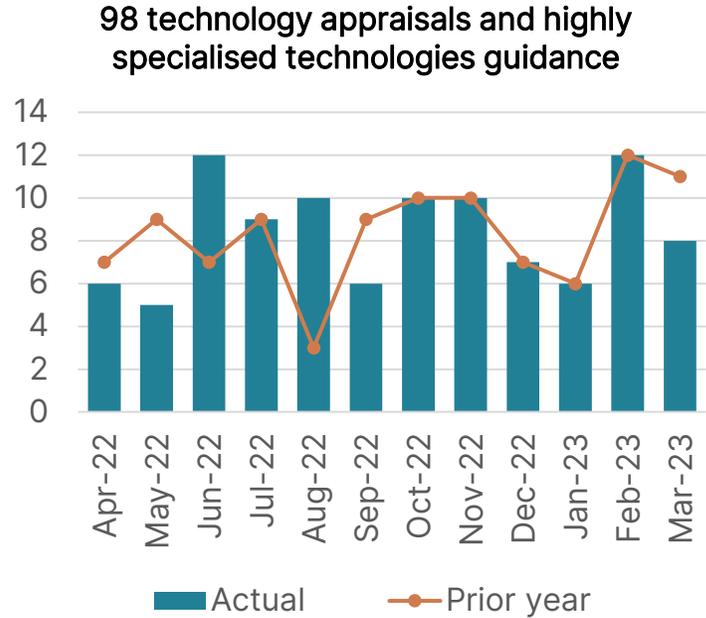
1 April 2022 to 31 March 2023

Core advice and guidance (Slide 1 of 3)



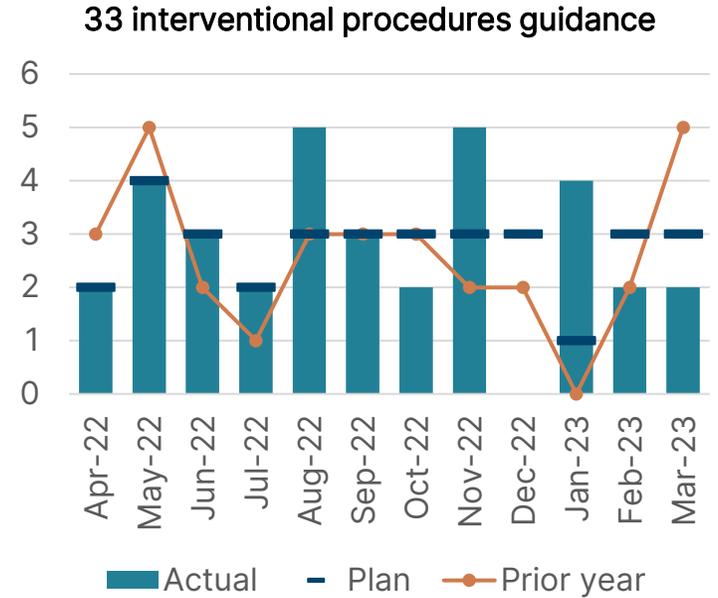
YTD planned	YTD actual	YTD %	Year-end forecast RAG status
16	17	121%	G ●

Planned volume exceeded.



YTD planned	YTD actual	YTD %	Year-end forecast RAG status
98	101	103%	G ●

The programme published 101 topics against 98 envisaged in the business plan.

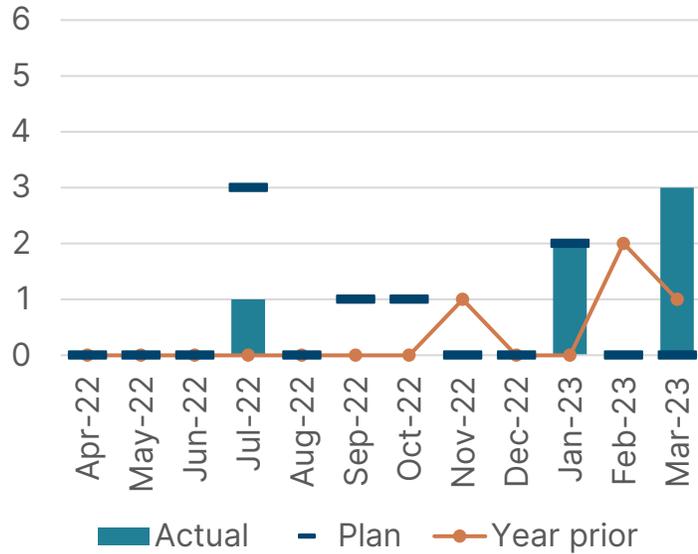


YTD planned	YTD actual	YTD %	Year-end forecast RAG status
33	33	100%	G ●

Planned volume met.

Core advice and guidance (Slide 2 of 3)

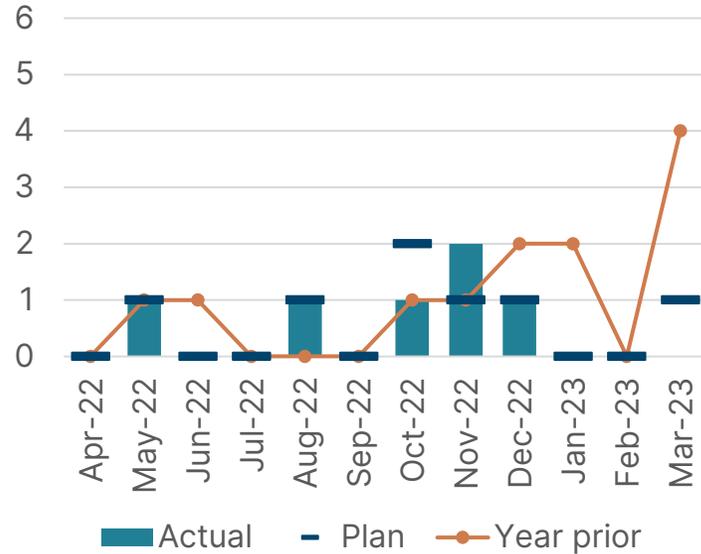
7 diagnostics guidance



YTD planned	YTD actual	YTD %	Year-end forecast RAG status
7	5	71%	A ●

The programme anticipated publishing 7 pieces of standard guidance in 2022/23. Early in the financial year this was revised to 6 standard pieces of guidance and 1 early value assessment (EVA). 3 pieces of standard guidance published and 3 were delayed - one due to a resolution request, one due to a request from the NHSE GIRFT stroke programme and one due to further discussion with RCGP. 2 EVA topics published in 2022/23.

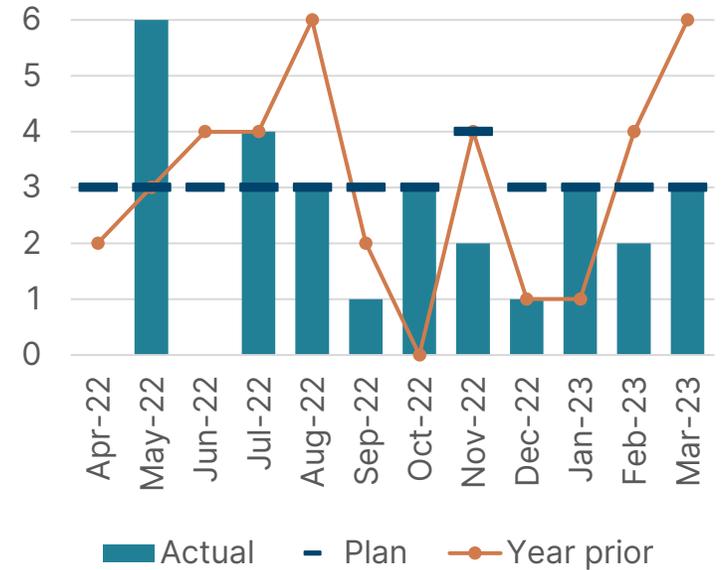
8 medical technologies guidance



YTD planned	YTD actual	YTD %	Year-end forecast RAG status
8	6	75%	A ●

The programme had planned to publish 7 pieces of guidance in 2022/23 but 1 topic due to publish in March was rescheduled and published on 11 April. As noted in previous reports, the programme was unable to meet the business plan target of 8 due to a decrease in appropriate topics in the topic pipeline, although the programme is also running several Early Value Assessment (EVA) pilots.

Up to 46 medtech innovation briefings

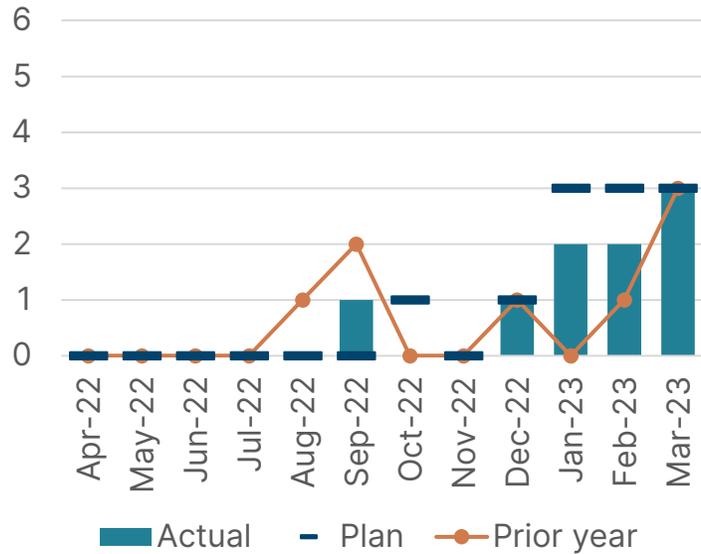


YTD planned	YTD actual	YTD %	Year-end forecast RAG status
36	28	78%	A ●

The programme planned to publish at least 36 MIBs against the formal target of 46. The programme completed the fourth quarter having published 28 MIBs, with a further 3 developed to publication stage in May/early June. These will be the final MIBs published.

Core advice and guidance (Slide 3 of 3)

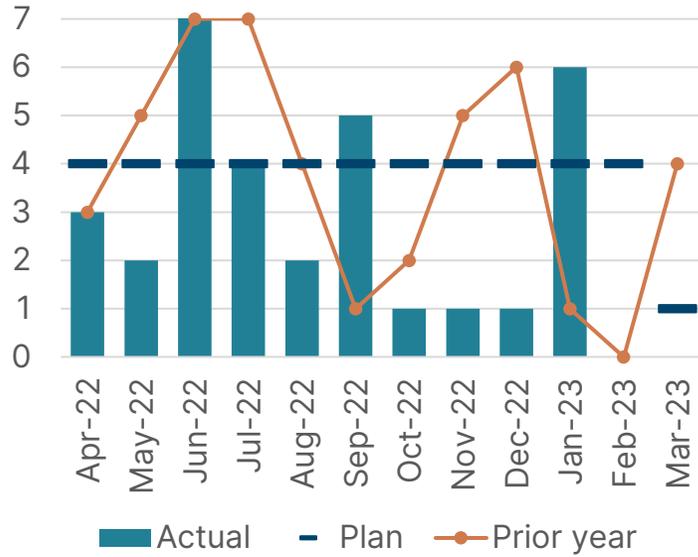
11 quality standard updates



YTD planned	YTD actual	YTD %	Year-end forecast RAG status
11	9	82%	A ●

The QS programme scheduled most of its 2022/23 publications for the second half of the financial year due to a pause in the programme during 2021/22. 2 QS topics have been delayed into 2023/24, one of which was due to internal capacity challenges and the other the need to re-run topic engagement due to limited response.

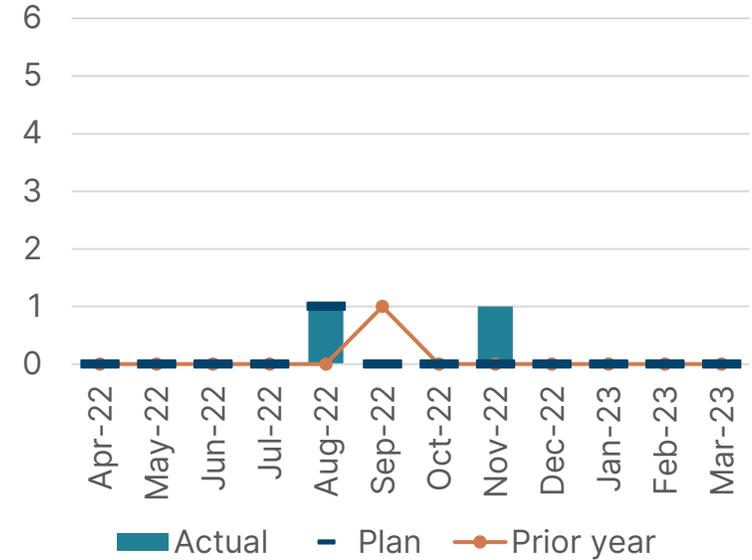
45 quality standard alignments



YTD planned	YTD actual	YTD %	Year-end forecast RAG status
45	34	76%	A ●

The programme ended the year behind plan due to a few of the underpinning guidelines publishing later than expected. The year-end outturn was 34 against the business plan target of 45.

1 indicator menu



YTD planned	YTD actual	YTD %	Year-end forecast RAG status
1	2	200%	G ●

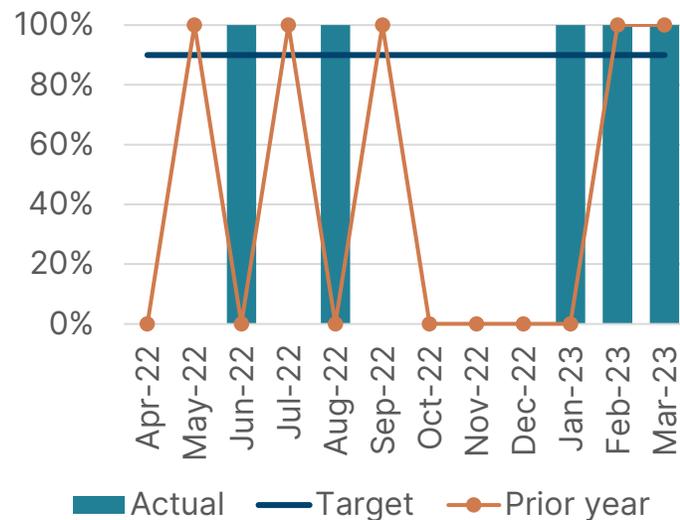
Menu published in August 2022 in line with plan. Additional Indicator menu published in November 2022.

Enabling timely access to new technologies through our technology appraisal and highly specialised technologies programmes

1 April 2022 to 31 March 2023

Enabling timely access to new technologies through our technology appraisal and highly specialised technologies programmes (Slide 1 of 2)

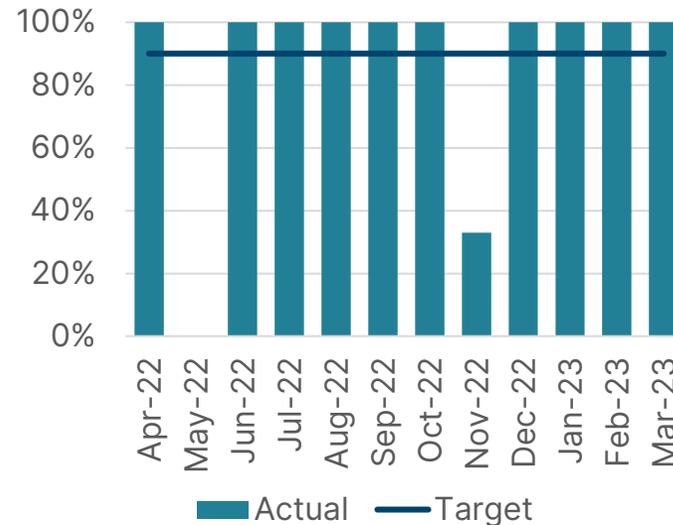
Percentage of technology appraisals (TA) and highly specialised technologies evaluations (HST) for all new drugs with a new active substance referred to NICE issuing guidance within 90 days of the product being first licensed in the UK



YTD %	Year-end forecast RAG status
100%	G ●

4 topics which published in February and March were excluded from the indicator as the caveats which remove topics affected by factors outside of NICE's control from the reporting applied.

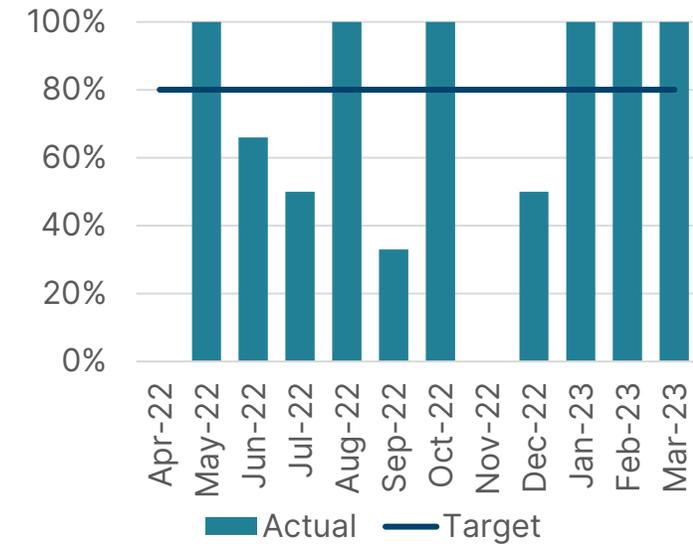
Percentage of single technology appraisals and highly specialised technologies for all licence extensions issuing draft or final guidance within 6 months of the product being licensed in the UK



YTD %	Year-end forecast RAG status
90%	G ●

1 topic which published in March was excluded from the indicator as the caveats which remove topics affected by factors outside of NICE's control from the reporting applied. (new indicator for 22/23: prior year data not available)

Percentage of TA/HST evaluation topics at or below the relevant target time in appraisal set out in the guide to health technology evaluation

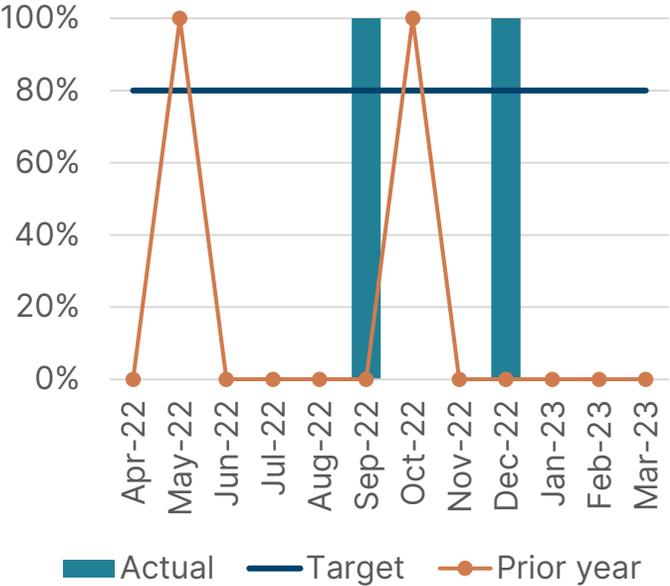


YTD %	Year-end forecast RAG status
79%	A ●

12 topics which published in February and March excluded as the caveats which remove topics affected by factors outside of NICE's control from the reporting applied (new indicator for 22/23: prior year data not available).

Enabling timely access to new technologies through our technology appraisal and highly specialised technologies programmes (Slide 2 of 2)

Percentage of TA/HST appeal panel decisions received within 3 weeks of the hearing



YTD %	Year-end forecast RAG status
100%	G ●

Target met – all appeal decisions provided within target timescale.

Percentage of TA/HST evaluation topics where post committee commercial activities have taken place which have draft guidance published within 63 days of committee recommendation



YTD %	Year-end forecast RAG status
56%	A ●

Low numbers due to a number of the initial STA2022 topics requiring a second ACM. March topic missed target due to delays in confirming committee decision before the commercial activity could occur. (new indicator for 22/23 so prior year data not available).

Percentage of TA/HST evaluation topics where managed access activities have taken place which have draft guidance published within 63 days of committee recommendation



YTD %	Year-end forecast RAG status
89%	G ●

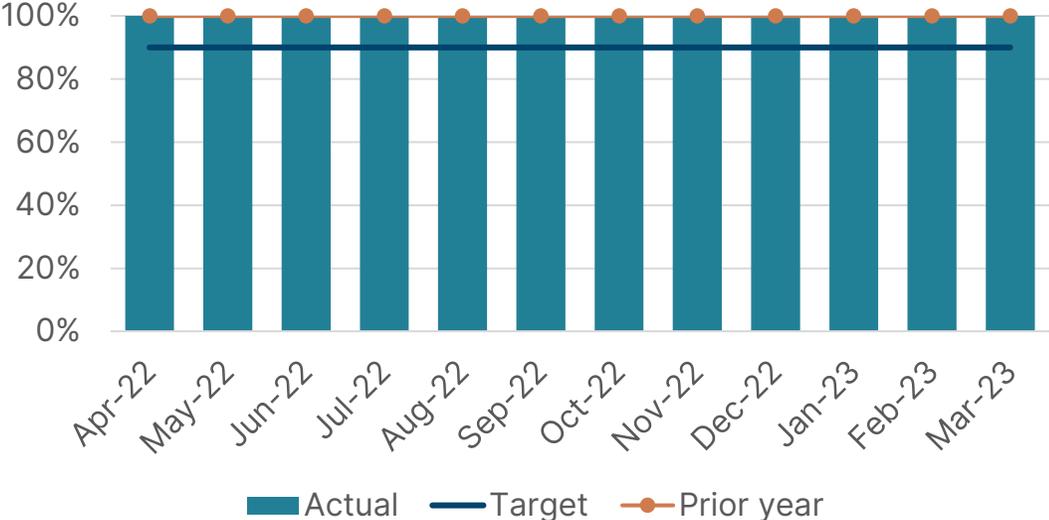
2 topics in March exceeded the target timeline. Factors included complexity of commercial negotiations and company reticence to accept recommendation into CDF (new indicator for 22/23 so prior year data not available).

Supporting implementation and adoption of our guidance

1 April 2022 to 31 March 2023

Supporting implementation and adoption of our guidance (Slide 1 of 1)

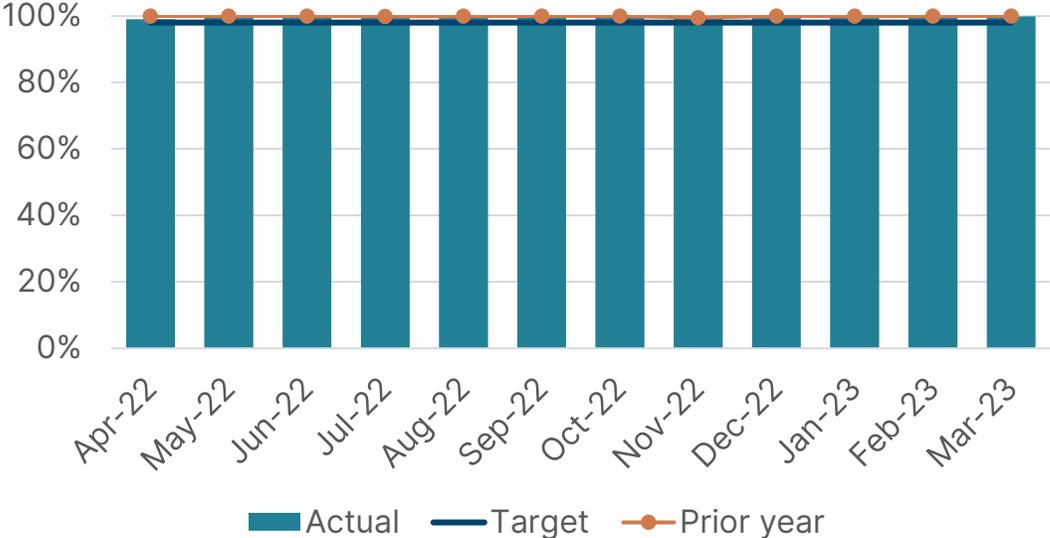
Resource impact products published to support all NICE guidelines (excluding COVID-19 rapid guidelines), positively recommended technology appraisals, medical technologies and diagnostics guidance at the point of guidance publication



YTD %	Year-end forecast RAG status
100%	G ●

Target met consistently.

Percentage of planned availability of the NICE website, not including scheduled out of hours maintenance



YTD %	Year-end forecast RAG status
99.9%	G ●

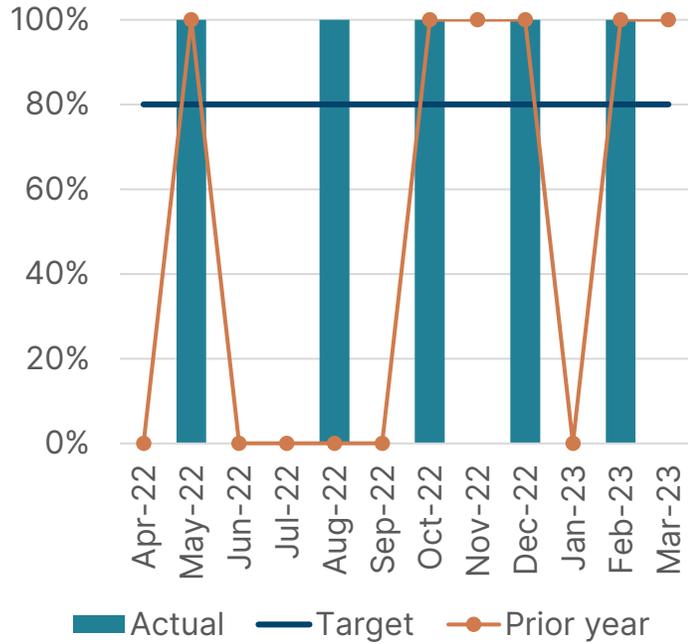
Target met consistently

Communications

1 April 2022 to 31 March 2023

Communications (Slide 1 of 2)

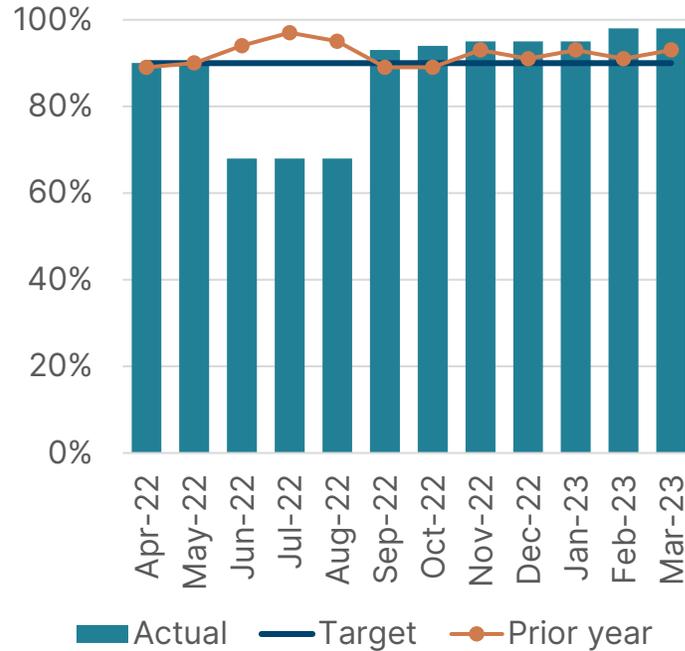
Complaints acknowledged and responded to in 20 working days



YTD %	Year-end forecast RAG status
100%	G ●

On track – no issues to report.

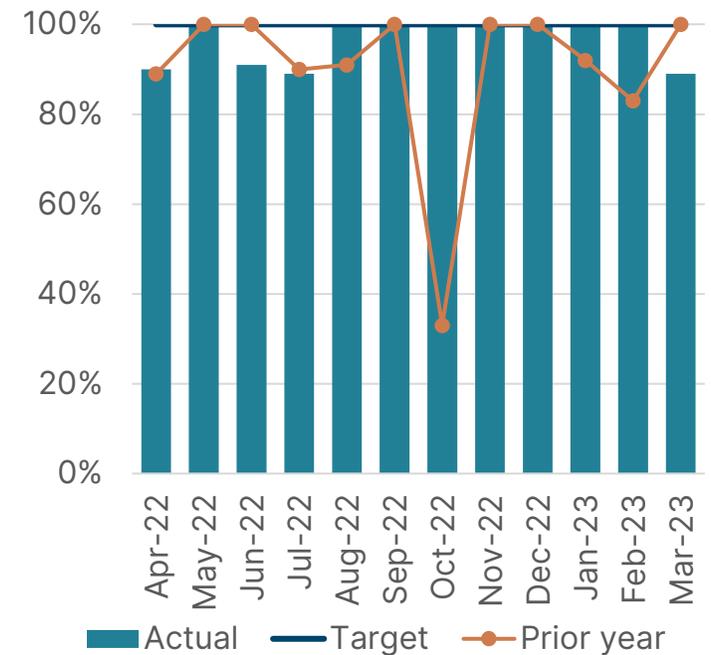
Enquiries acknowledged and responded to in 18 working days



YTD %	Year-end forecast RAG status
88%	A ●

During the summer, the team worked through a small backlog of cases caused by a combination of factors, including capacity issues. Recovery plans were put in place and since September each month's performance was above target.

Freedom of Information requests responded to within 20 working days

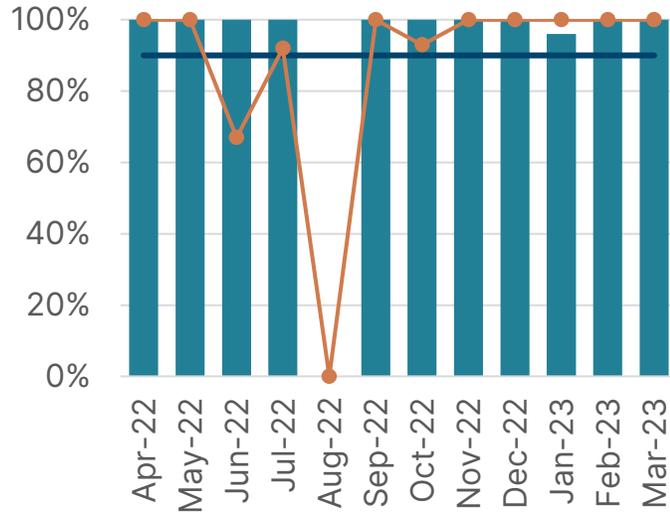


YTD %	Year-end forecast RAG status
98%	A ●

2 requests answered outside of timescale in March: 1 due to staff availability and the other due to delay in establishing the confidentiality of the information. Overall 149 of the 154 requests responded to within timescale in 2022/23.

Communications (Slide 2 of 2)

Parliamentary Questions (PQs) contribution provided within requested time frame

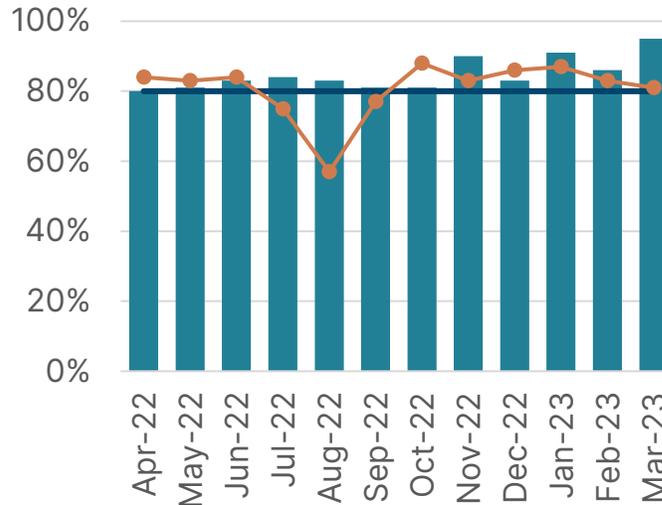


Actual Target Prior year

YTD %	Year-end forecast RAG status
99%	G ●

Target met.

Proportion of media coverage of NICE that is positive

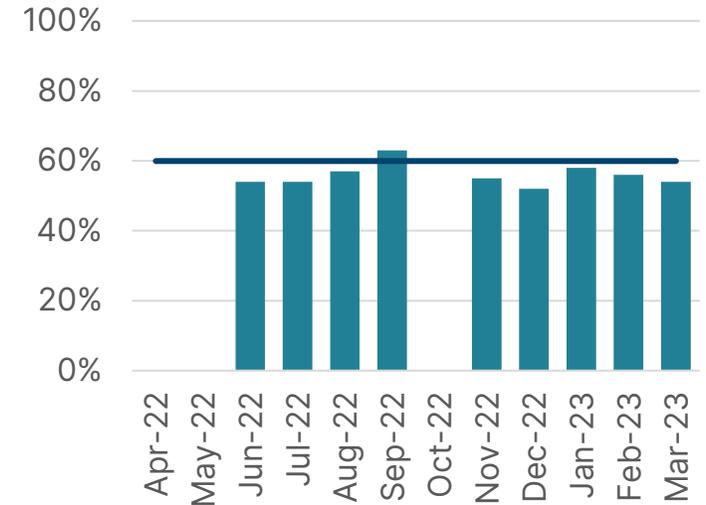


Actual Target Prior year

YTD %	Year-end forecast RAG status
85%	G ●

The overall positive coverage for NICE remains consistently high and above target.

Proportion of NICE-generated news coverage includes at least one key message



Actual Target

YTD %	Year-end forecast RAG status
56%	A ●

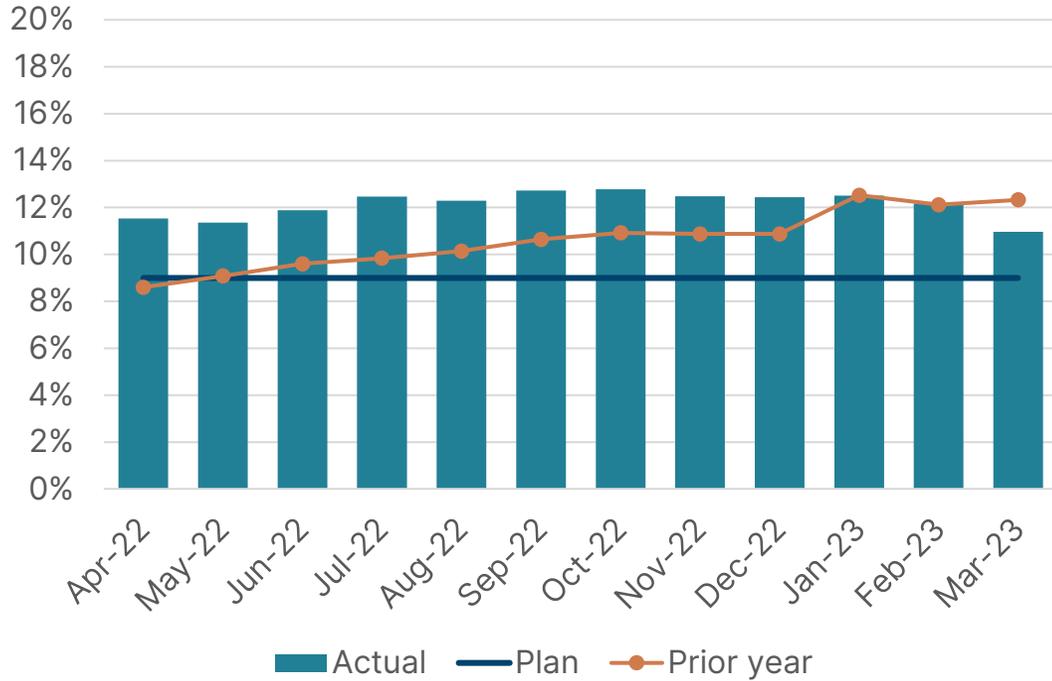
Data collection began on 1 June 2022 so YTD average calculated from June. The Press Office are including key messages in all proactive releases.

People

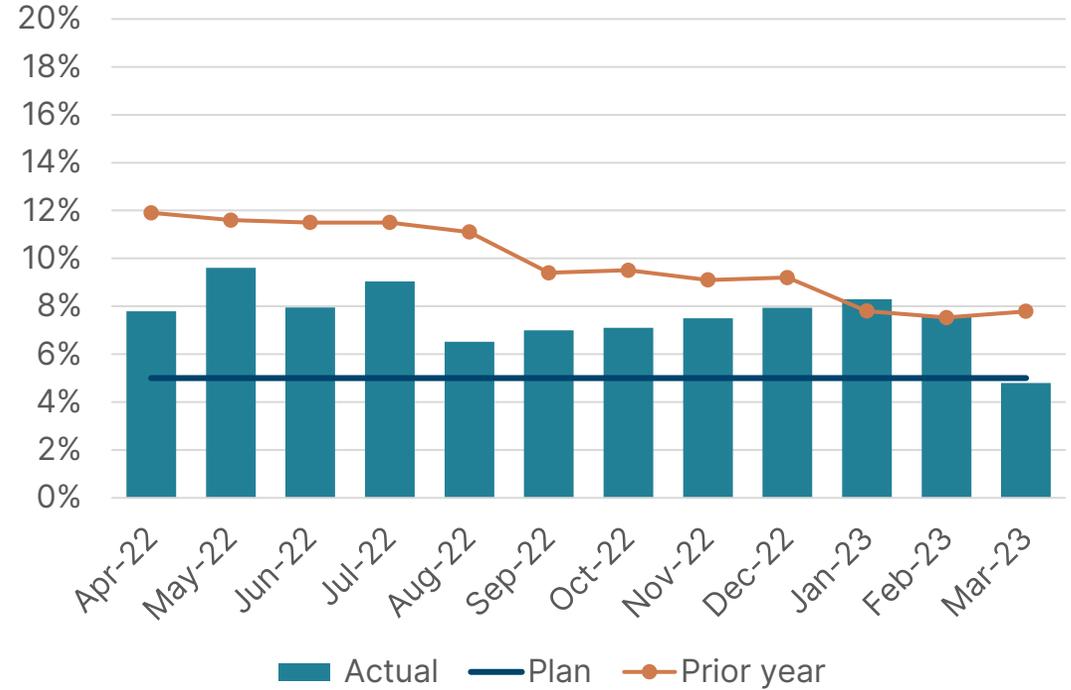
1 April 2022 to 31 March 2023

People (Slide 1 of 2)

Rate of staff turnover



Vacancy rate



March 2023	Year-end forecast RAG status
10.97%	R ●

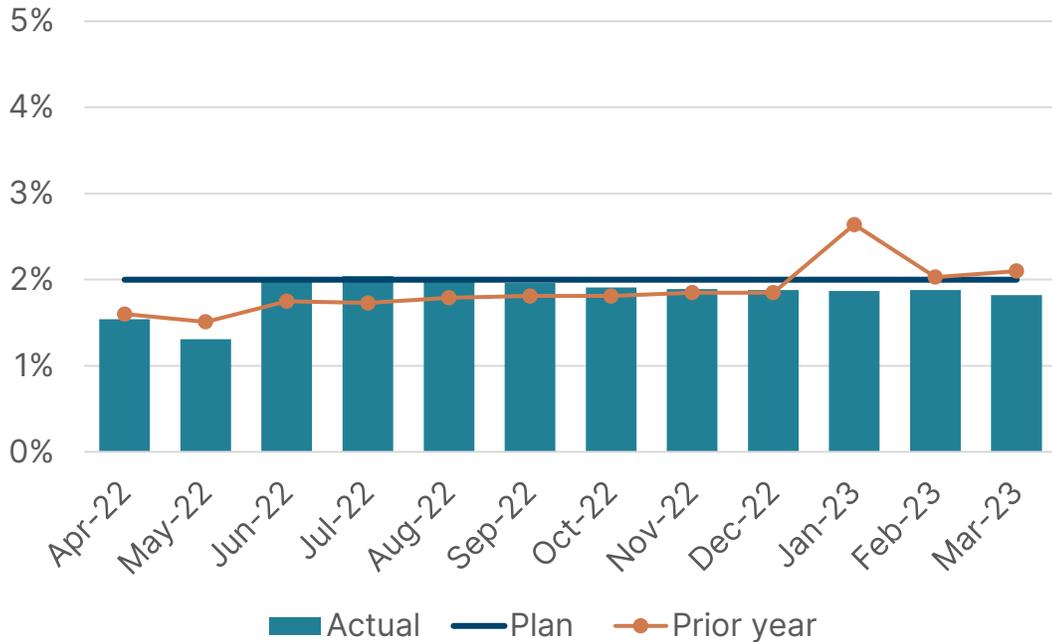
We are closely monitoring turnover for any trends and reviewing exit data, also working with a new provider to refresh and relaunch the exit interview process to gain further insight into staff reasons for leaving. We are also working towards NICE being an employer of choice with various interventions from recruitment through to learning and development opportunities and organisational design. We are developing People plans with directorates using workforce information data.

March 2023	Year-end forecast RAG status
4.8%	G ●

Long standing vacant posts have now been removed as part of the establishment control and budget setting process. The establishment has been reconciled between HR & Finance information and vacancy data is now reported from the ESR system. Recruitment and Workforce teams continue to work with Directorates to ensure they have timely recruitment plans.

People (Slide 2 of 2)

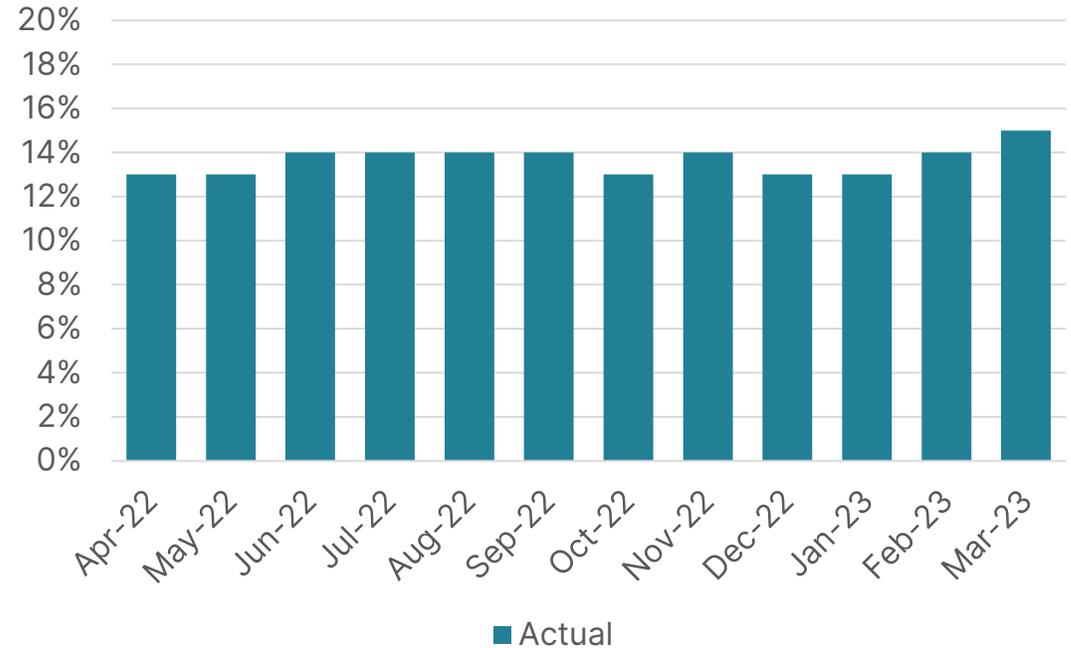
Sickness absence (proportion of WTE days reported as sickness)



March 2023	Year-end forecast RAG status
1.82%	G ●

Stress continues to be the highest cause of sickness absence at NICE. HR are proposing the introduction to the HSE Stress Management Standards which will provide methods in dealing with this at an organisational level. This will be in conjunction with the health and wellbeing strategy

Increase in the proportion of ethnic minority staff in senior roles



March 2023	Year-end forecast RAG status
15%	A ●

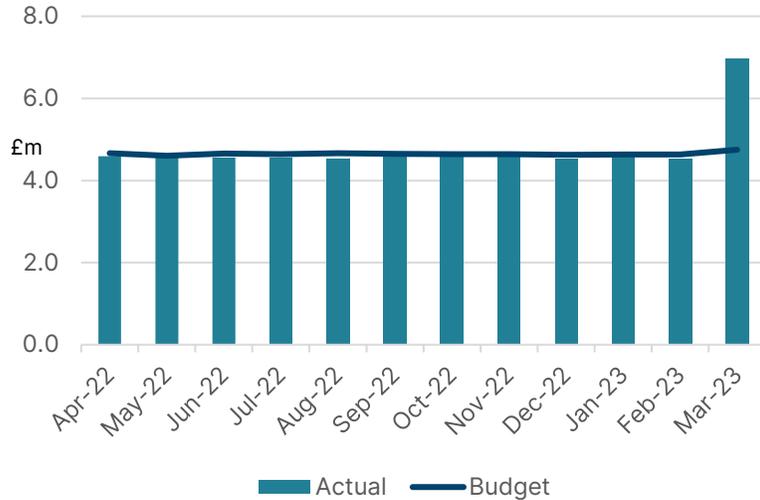
The figure has increased for a second consecutive month due to successful recruitment and promotion. We are developing an action plan for year 2 of our organisational workforce objectives, which also includes areas of improvement identified in the WRES data. The areas of focus include: recruitment, and the design and delivery of development offers for ethnic minority who wish to progress. (new indicator for 22/23 so prior year data not available).

Finance

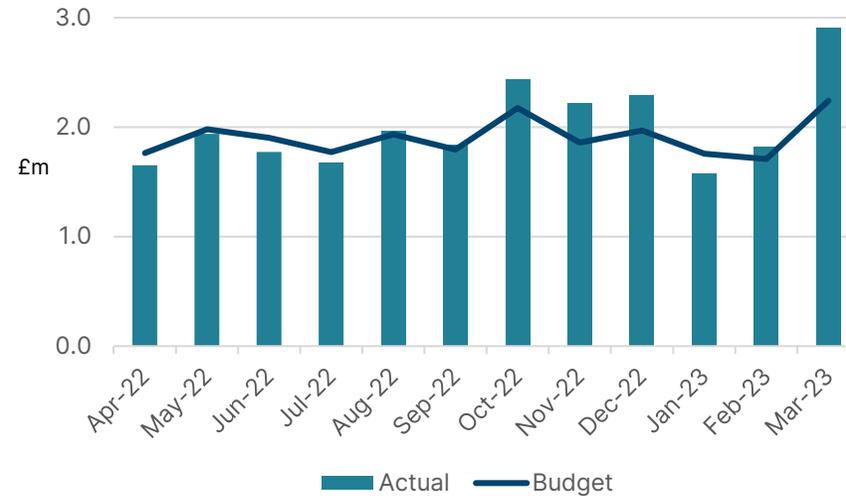
1 April 2022 to 31 March 2023

Financial position as at 31 March 2023

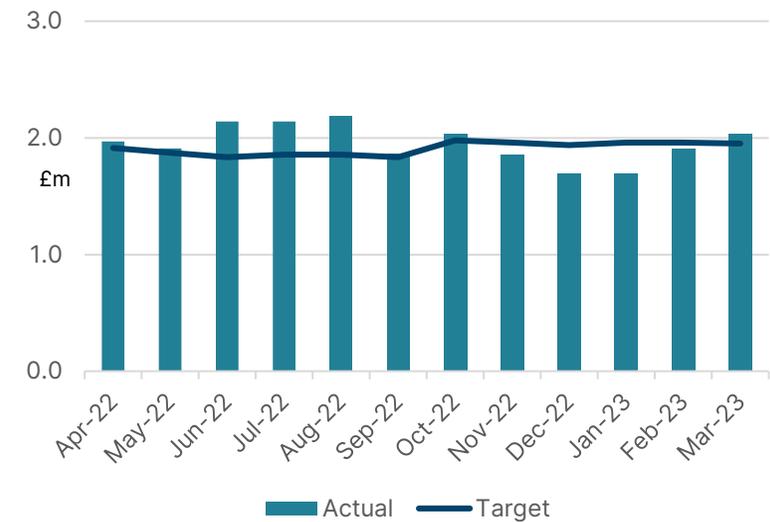
YTD PAY **£1,284,000** overspend



YTD Non-Pay **£1,070,000** overspend



YTD Income **-£575,000** surplus



NICE ended the year with an underlying underspend of £0.4m, meeting our statutory duties, however following the likely agreement of the non-consolidated pay award for 2022-23, we were asked to accrue the impact of the pay award to NICE (£2.15m), which resulted in an overspend against budget of £1.8m. DHSC have committed to provide budget cover for the overspend.

Pay is overspent as a result of accruing for the proposed pay award for 2022-23 (£2.15m). The underlying pay performance in year was £0.9m underspend driven by vacancies and staff turnover.

Non-Pay is overspent due to investment in non-recurrent projects delivered in Q3 and Q4 to offset the underlying pay underspend. The increased non-pay expenditure in March relates to the completion of several of these projects, higher spend on the EAG contract, IT hardware costs, higher than anticipated expert fees in NSA and PIP expenses, and increased T&S spend.

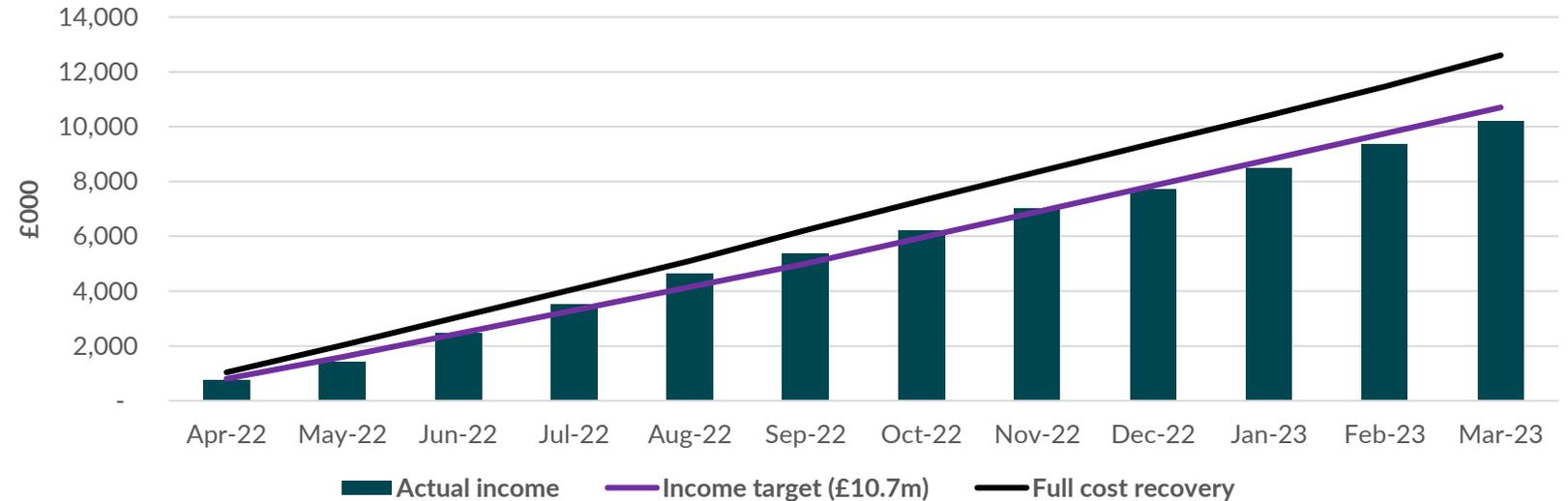
Income: NSA delivered a £0.6m over recovery against its income plan for 2022-23. TA delivered £10.2m of revenue against a plan of £10.7m. The overall income surplus includes unplanned secondee income, and higher than budgeted sub-let income in the Manchester office.

Spend Category	Annual Budget £000	Outturn £000	Outturn Variance £000
Pay	55,912	55,046	(866)
Pay Award 2022-23	-	2,150	2,150
Non-pay	23,006	22,410	(596)
Investments	-	1,666	1,666
Income	(22,892)	(23,448)	(555)
Total	56,025	57,824	1,799

Technology Appraisals

2022-23 Performance	£000
Income Target	10,700
Actual Income	(10,200)
Variance (under plan)	500

Cumulative TA Income and Cost 2022-23



TA have had an excellent year publishing 101 topics compared to 98 in the plan. However the revenue recognised in 22/23 was £10.2m, which is £500k less than plan. The lower outturn compared to plan is a result of topics in the work programme being removed, rescheduled, or paused following changes to regulatory timelines and evidence submission dates. Ongoing commercial discussions and pauses for further analyses of evidence also impact revenue.

The programme has recovered 81% of its costs in 22/23 compared to 75% in 21/22. The improvement in cost recovery reflects partially the increase in TA fees from 1 April 2022 as milestones have been completed for new appraisals coming through the pipeline.

NICE Scientific Advice

2022-23 Actuals	£000
Expenditure	2,928
Income	(3,335)
Variance (surplus)	(407)



NICE Scientific Advice (NSA) has generated a surplus of £407k in 2022-23, continuing the strong performance seen in the second half of the last financial year. The higher revenues can be attributed to continuing high levels of demand for early support services and increased technical capacity within the team.

Looking ahead, the team will be developing and testing new early engagement services; optimising some of the existing services for digital and medtech products; and implementing a more balanced resourcing model to better manage capacity and demand. This is expected to bring additional non-GIA revenue to NICE in 2023-24.