

Weighing up the evidence: Behind the scenes at NICE

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How is evidence assembled?

- Manuals set out the reference case – the methods NICE expects to be used to estimate clinical and cost-effectiveness.
 - Supported by technical support documents – best practice guides.
- Systematic search and synthesis all the available evidence into the best model of a disease or pathway.
 - Clinical trial data, real-world evidence and data from stakeholder submissions.
- External critique and quality assurance.
- Results and key areas of uncertainty summarised and presented.



How is evidence considered?

- Independent, multi-disciplinary committee drawing on different kinds of expertise.
- Structured decision-making framework
 - nature and quality of evidence and uncertainties
 - decision modifiers e.g. severity modifier
 - plausibility of model inputs and outputs.
- Flexibilities and discretion
 - Non-reference case scenarios
 - Equalities considerations.



How do we ensure that the voices of patients and those with lived experience are heard?

- Invite patients, their carers and organisations representing them to make submissions and attend committee meetings.
- Key contributions:
 - Explaining the disease background and outcomes that are important to patients
 - Experience with current treatments and sometimes the new treatment
 - Check the evaluation inputs and the outputs make sense and that all the important factors have been included.
- Consultation on draft recommendations.



Ensuring methods remain at the forefront of technology evaluation/guideline development?

- Real-world evidence (RWE) framework
 - use cases and supporting the use of RWE to resolve evidence gaps.
- Statement of intent on artificial intelligence (AI)
 - best practice for AI-based methods to support evidence generation
 - guidance on evaluating AI-based technologies.
- Modular updates
 - health Inequalities, EQ-5D-5L value set, surrogate endpoints.
- Public engagement - NICE Listens
 - environmental sustainability, valuing health gains in severe diseases.



What does good look like?

- NICE's stakeholders have confidence that:
 - the evidence has been considered reasonably and fairly
 - they have had chances to provide input, and this has been taken into account
 - the numbers produced by the modelling are robust because their validity has been tested at each stage
 - flexibilities and discretion open to the committees have explored and used where appropriate.
- Decisions are transparently reached and clearly explained.

