ABHI

MEMBER GROUPS

October 2026

CARDIOVASCULAR

Chair: Nick Walker, Edwards

Heart Valve
Chair: TBC

Stroke
Chair: Steve Pilcher, Stryker

Vascular
Chair: Harvey Galvin, Terumo
Vice Chair: Robert White, Boston Scientific

The Cardiovascular Group at ABHI brings together the various working groups that relate to the cardiovascular (CV) system. The group is intended to bring a high-level view of the impact of CV challenges to the NHS and more widely to the UK population in terms of welfare spending and the impact on the overall economy. It has three key working groups focused on; vascular technologies, the prevention, diagnosis and treatment of stroke and heart valve disease.

Achievements	Priorities
With ABHI member support, the Vascular Society has run the first pilot of a device-specific registry for abdominal aortic aneurysm (AAA) procedures and is now looking to expand the device specific nature of the registry into other clinical areas.	To work on the implementation of the recommendations outlined in the Cardiovascular Health Check Report.
Members coordinated a robust response to the AAA NICE Consultation, delivering broad stakeholder agreement and continued insight sharing.	To coordinate activity across the sub-sector member groups so a collective voice can tackle common challenges.
Developed a Cardiovascular Health Check Report to help the group achieve its mission, vision and purpose.	

DIABETES

Chair: Jeevan Kumari, Ypsomed.
Vice Chair: Tori Griffiths, Roche Diagnostics

The voice of the Diabetes management industry.
Working alongside people with diabetes, clinicians, health systems, and support groups/charities to make available the highest quality, sustainable, technology-based solutions to treat and manage diabetes.

Achievements	Priorities
Joint ABHI and Diabetes Technology Network (DTN) position on Insulin Pumps.	Articulate the value of the diabetes technology community, providing people with diabetes with equity of access to the highest quality, sustainable, technology-based solutions to treat and manage their condition.
Briefing from All Party Parliamentary Group for Diabetes to the ABHI Diabetes group.	Build and strengthen relationships with identified stakeholders.
Utilised the publication of the GIRFT diabetes report to identify key areas of focus for industry.	Respond as a group to appropriate consultations and policy positions to position the value of the diabetes tech community.

DIAGNOSTICS

Chair: Bruce Caldwell, BD
Vice Chair: Paul Skingley, BioMerieux UK Ltd & Charlotte James, Philips

The group brings together a broad range of stakeholders across Government, NHS, academia, research and industry to enable the vision of an early and holistic diagnosis healthcare model. It is the expert industry group, connecting-up different diagnosis sectors within the industry with external specialists and leaders. The group provides knowledge and leadership to progress the early diagnosis model and build high levels of diagnosis capacity and capability in the UK. ABHI Diagnostics also focuses on antimicrobial resistance (AMR). With infections getting harder to treat, tackling AMR requires a holistic approach, from education and awareness, through to the application of diagnostics tools to identify pathogens that inform the appropriate therapies, as well as management of complications such as sepsis.

Achievements	Priorities
Partnered with NHS England/Improvement to publish a vision for early diagnosis in the UK with ministerial support.	Ensure the value of diagnostic information is central to early disease detection.
Provided industry leadership to support rollout of NHS Test and Trace.	Lead the industry in developing and implementing strategies to boost diagnostic capabilities in the UK.
	Expand genomic, and other precise diagnostic, testing to inform personalised treatment strategies.
	Develop value and access routes for clinical deployment of AI/ digital diagnostics.
	Grow ABHI's diagnostics community.

DIGITAL HEALTH

Chair: Michael Shenouda, Open Medical
Vice Chair: Nina Goddard, Intuitive Surgical UK Ltd

Building on unique opportunities in the NHS, academic institutions and third sector, the Digital Health Group works with national organisations to ensure the UK maximises opportunities for citizen health and economic wealth by investment in data-driven healthcare and creates a strong infrastructure and commercial environment to support development of the best HealthTech solutions.

Achievements	Priorities
Published White Paper on Digital Health Regulations to take an industry leadership position.	Cyber Security: o Establish a cross-sector group with industry, NHS and MHRA to align cybersecurity policy, guidance and processes. o Drive deduplication of cyber assurance requirements – CE+, Risk Ledger, DSPT and DTAC. o Support members on connected device and post-market cyber resilience expectations.
Established a Task and Finish group under the Accelerated Access Collaborative to address specific Digital Health market access issues.	Apps & Wearables: o Launch strategy for patient-facing apps and wearables as part of routine care. o Secure a clear assessment and reimbursement route for patient-facing tools, aligned to HealthStore and other existing processes. o Resolve build v buy questions and interoperability with the NHS App and Single Patient Record.
Supported MPs to establish and provide ongoing secretariat support for an All Party Parliamentary group on Digital Health.	Digital Adoption: o Streamline the national adoption pathway (NHAP), consolidating DTAC, DPIA and DSPT in the NHS Innovator Passport. o Re-engineer funding flows and reimbursement to finance system digitisation and digital tools. o Support real-world evaluation and spread of proven digital tools across the NHS.
Provided industry input into a wide range of policy initiatives including: NICE Digital Assessment programme & Multi Agency Advice Service, NHSX, Digital Technology Assessment Criteria, Scottish Life Science Group, HDR UK Innovation Portal and the Office for Life Sciences Health Data Policy.	AI Adoption: o Promote real-world evaluation and adoption of AI tools, focused on productivity and clinical impact in diagnostics. o Build the evidence, workforce and assurance conditions for AI triage and scaled deployment.
	Regulation of AI and SaMD: o Support delivery of a regulatory roadmap for SaMD/AIaMD, including an international reliance route for EU and US approved products. o Support roll-out of the AI Airlock to enable GenAI and LLM development within a safe regulatory sandbox. o Clarify consumer v professional (shadow use) LLMs, borderline products and AI classification.
	Data Infrastructure and Interoperability o Align HDRS with HealthTech needs, providing multi-omic, Trust-level granularity at a national scale. o Advance interoperability standards, including the Single Patient Record and NHS App. o Shape developments on data access policy, COPI reforms and patient-contributed data.

ABHI
GOVERNMENT AFFAIRS

GOVERNMENT AFFAIRS

Chair: Dan Jones, Stryker

Vice Chair: Helen Haggart, Johnson+Johnson, Hannah Gagen, Coloplast

The Public Affairs group is ABHI's main forum for developing and communicating its public affairs strategy. It aims to raise the profile of the benefits and impacts of HealthTech across Parliament and Government, while providing members with the latest insights on legislative change.

Achievements	Priorities
ABHI continued to increase HealthTech representation and input across formal government engagement platforms culminating in a Life Sciences Vision that acknowledges the crucial role of HealthTech.	To ensure strong impact follows the increased representation of the HealthTech sector in all formal government engagements (Life Sciences Council, Health Technology Partnership, Global Opportunities Board, Life Sciences Implementation Board and the Innovation Research and Data Group).
Securing multiple references in the Life Sciences vision related to ABHI's Chief Innovation Officer campaign, including having innovation and research as a core expectation across the NHS, alongside commitment to building metrics that can be used to monitor improvements.	Work to support the commitments within the Life Sciences Vision that ensures the delivery of innovation is both resourced and accountable across the NHS.
	To inform ABHI's position and activity on key issues in Parliament, particularly where there is a relevant legislative programme.

ABHI
HEALTH INEQAULITIES & WOMEN'S HEALTH

HEALTH EQUITY & WOMEN'S HEALTH

Chair: Tash Rees, Baxter

This group represents those working to address health inequalities, with a particular focus on women's health, and to promote equitable access to healthcare and improved outcomes. ABHI acts as a convener for change, raising the profile of health inequalities and women's health, providing a platform to educate members and amplify calls for action.

Priorities

Research and map areas of healthcare where inequities persist, particularly in women's health.

Develop targeted policy recommendations to address the root causes of these inequalities.

Encourage HealthTech companies to design inclusive technologies and promote diversity in clinical trials, data collection, and algorithm development.

Advocate for equitable health policies, ensuring women's health and health equity are prioritised in reforms.

Organise awareness campaigns and provide education on health inequalities, especially in women's health.

Foster cross-sector partnerships to drive systemic change and develop metrics to track progress.

Share best practices and case studies to demonstrate the effectiveness of equity-focused health interventions.

HR LEADERS NETWORK

Chair: Jonathan Coles, Philips
Vice Chair: Thane Rolls-Drew, Intuitive

The HR Leaders Network identifies and responds to factors that impact talent development across the HealthTech sector. It provides an opportunity for members to work together on industry-specific skills initiatives, share best practice, keep updated on employment legislation, and broaden the network of partners and stakeholders with whom to collaborate on mutual priorities. The group is also exploring how it can advance equality, diversity and inclusion in HealthTech.

Achievements	Priorities
Provided guidance and support on HR and workforce related issues to manage the organisational impact of the COVID-19 pandemic, including: Key worker status Furlough scheme Flexible and homeworking Return to the workplace COVID testing and vaccination	Provide industry leadership on workforce and organisational issues.
Assisted organisations to get ready for 1st January 2021 new immigration system.	Develop best practice to assist members including future workplace, flexible working, benefits, use of technology, skills in a digital world and culture.
Provided training and education on implementation of IR35.	Share and amplify industry best practice to progress diversity and inclusion in the workforce.
	Continued review of the use of apprenticeships in the industry and relevant standards available.

INTERNATIONAL

Chair: Andrew Thelwell, FirstKind Medical
Vice Chair: Graeme Cameron, Pennine Healthcare & Claire Nicholson, Kimal

The International group provides an interface with government for input on trade and investment. The group seeks to identify opportunities for members and works on strategy to best to unlock them. This also includes the development of ABHI's international activity programme, designed to enable UK HealthTech business to expand in global markets.

Priorities

Priorities
Input into the UK's development of Free Trade Agreements.
Inform the work of the HealthTech International Working Party, which is a sub-group of the Health Technology Partnership, and is focused on co-ordination of international trade activity.
Work with the Department for Business and Trade and input into sector specific elements of the Department's Export Strategy.

LEGAL & COMPLIANCE

Chair: Linda Sneddon, WL Gore
Vice Chairs: Jon Hurd, Corin

The Legal and Compliance Group augments the work of other ABHI groups by providing advice and support on legal issues, especially in the UK market and regulatory areas. The group has recently incorporated the Credentialing and Access Group, therefore adding any legal implications to the UK's credentialing network to the discussion.

Achievements	Priorities
The group has held several external presentations on topics such as Class Actions and Lloyd v Google, and greatly benefits from the general participation of external law firm colleagues.	To successfully integrate the Credentialing and Access Group into the Group.
The Chair of the Code of Ethical Business Practice complaints committee has been made a member of the group, in order to inform the members of infringements to the Code.	To consider the pending five-year review of the ABHI Code of Ethical Business Practice in light of potential Medech Europe updates and the challenges presented by social and corporate responsibility requirements.
The Chair and Vice Chair have been instrumental in the drafting of the white paper, related to 'Placed Equipment'.	To monitor any legal developments presented by the developing UK regulatory requirements, that may affect the HealthTech sector, including those related to diagnostics and digital products.
	To develop a strategy for education and encouragement for the regulatory group, thereby fostering an environment of participation by members.

MUSCULOSKELETAL

Orthopaedics
Chair: Paul Gibbons, Corin Group PLC
Vice Chair: Mike Hope Stryker

Spine
Chair: TBC
Vice Chair: TBC

ABHI Musculoskeletal brings together orthopaedics encompassing joints, and spine. Together with stakeholders, including clinicians and patient support groups, we work to shape and improve the future of musculoskeletal care.

Achievements	Priorities
Good relationship established with the executive of the British Orthopaedic Association and various patient organisations.	To raise the profile and address the implication of arbitrary restrictions placed on patients needing musculoskeletal services.
COVID-19 has presented some challenges, but the orthopaedics project has helped in this area of "shaping the environment". The group was reformed to focus on the effect of COVID-19.	To ensure the appropriate environment for the spinal and orthopaedics industries to work with the NHS in a safe and compliant method.
A strong industry voice established when working with our stakeholders, including United Kingdom Spine Societies Board/BritSpine, National Joint Registry/Northgate and Orthopaedic Data Evaluation Panel /Beyond Compliance Steering group.	To strengthen the industry voice in our relationships with our stakeholders and patient groups.

OPHTHALMOLOGY

Chair: Emily Paynton, Alcon
Vice Chair: TBC

Ophthalmology continues to face significant capacity pressures, with increasing demand for services such as cataract surgery and retinal care. The ABHI Ophthalmology Group brings together industry experts to support the sector in addressing these challenges, improving patient access, and driving innovation to enhance eye health outcomes across the UK.

Achievements	Priorities
Convened meeting with the the Royal College of Ophthalmologists and industry.	Ongoing engagement with the clinical community ar ound ophthalmology service provision.
Industry's objectives on educational and clinical training high - lighted and clinical requirement requested.	Identify the Royal College of Ophthalmologists requirements for support on the restart of ophthalmology.
Individual manufacturers educational offering presented to the Royal College of Ophthalmologists bilaterally.	Engagement with GIRFT regarding the GIRFT ophthalmology Report.

PATIENT SAFETY

Chair: Greg Quinn, BD
Vice Chair: Becky Whiteman - Baxter

The group collaborates across the HealthTech industry, working as a trusted partner for leading and providing key insights to stakeholders in improving patient and healthcare worker safety. Partnering across the healthcare community, the group aims to ensure that innovation and technology, which improves the individual experience of care, are identified and accessible.

Achievements	Priorities
Identified "never events" to address as an industry group.	Raising the profile of current and future impact of HealthTech on key UK patient and healthcare worker safety issues.
Developed patient safety paper focussed on key areas of concern in patient safety.	To foster collaborations between industry and relevant stakeholders.
Industry engaging with Key Stakeholders in the patient safety arena.	To listen to the patient voice so they feel empowered, able to provide insight and improve the safety of their care.

REGULATORY

Medical Device Regulatory
Chair: Cait Gatt, BD
Vice Chair: Roland Back, Abbott, Claire Huntington, Pennine Healthcare & Darren Thain, Smith+Nephew

IVD Regulatory
Chair: Sue Spencer, Qserve Group UK, Ltd & Megha Iyer, Thermo Fisher
Vice Chair: Erin Wigglesworth, Cepheid, UK

The Medical Device and IVD Regulatory Groups are ABHI's forums for developing and communicating policy on wider regulatory, environment and standards issues including those covered by UK CA marking, EU MDR and EU IVDR.

The groups work collaboratively with other ABHI member groups to ensure new UK and EU regulations provide safe and timely access to medical devices, IVDs and digital health products, whilst maintaining the balance between risk and benefits for patients.

The groups also bring together a sub group on the decontamination of HealthTech products, that will develop a programme of work supporting decontamination of medical devices and IVDs.

Achievements

Medical Device Regulatory

- Significant and comprehensive input into the UK CA Marking sub-group to influence future UK regulatory framework, including detailed response the MHRA consultation.
- Ensured external presentations into all group meetings on a number of wide-ranging topics, including standards and MHRA process and procedures.
- Included a number of international regulatory presentations in the group discussions, including from Swiss Medtech and MedTech Europe.

IVD Regulatory

- Significant and comprehensive input into the UK CA Marking sub-group to influence future UK regulatory framework, including detailed response the MHRA consultation.
- Led the industry voice on the Coronavirus Test Devices Approvals (CTDA) process.
- Worked closely with MedTech Europe to ensure an extended transition period for IVDR.

Priorities

Medical Device Regulatory

- To work with members of the IVD and digital interest groups to develop a regulatory oversight group, that will ensure messaging is consistent with wider ABHI policy.
- Ensure that ABHI and its members are recognised as the senior partner in MHRA's efforts to progress CA Marking, particularly with respect to timely inputs into the respective consultations.
- To develop a strategy for education and encouragement for the group, thereby fostering an environment of participation by members.

IVD Regulatory

- Build a strong IVD regulatory group to establish authoritative leadership in the UK.
- Drive the UK industry response to the emerging UK regulatory framework.
- Influence and assess the impact of new IVD regulations and guidelines in the EU and internationally.

ROBOTIC ASSISTED SURGERY

Chair: Chris Gray, CMR Surgical
Vice Chair: Daniel Jones, Stryker

The group will develop programmes and networks to further the adoption of surgical robotic systems and the development of Robotic Assisted Surgery as a technique. It will engage with the clinical community, policy makers and other relevant stakeholders who have a strong interest in the sector.

It will be the expert ABHI group, informing external audiences on the benefits of Robotic Assisted Surgery and will proactively engage with stakeholders to develop and implement national programmes that will shape the future adoption and growth of robotic assisted surgery across the UK.

Achievements

Successful group launch with commitment from key opinion leaders to partner with the group and progress robotic-assisted surgery in the UK.

Priorities

Engage with relevant stakeholders to define a national programme for England with policies around:

- Evidence generation, which will enable the efficient assessment of the clinical and economic value of RAS.
- Development of training and education for NHS staff.
- Commissioning and deployment of RAS.

Build relationships with organisations actively involved in shaping the future of robotic assisted surgery, ensuring the group is recognised as a trusted partner that engages and contributes to the development of new policies.

Highlight the understanding, value and benefit of RAS to Payors, policy makers and providers in order to ensure equity of access and increase patient access in this area.

Raise the profile of this industry sector, and robotic assisted surgery in general, through events and other public engagements.

SAPT

Chair: TBC

The Sterilisation and Associated Processes Technologies (SAPT) Group works to proactively identify and address challenges and opportunities relating to decontamination, reprocessing, and related processes (cleaning, disinfection, packaging, sterilisation) through communication and collaboration with the ABHI Regulatory Groups, senior leadership teams, and relevant external stakeholders.

When appropriate, the group develops industry positions, recommendations for new processes, and best practices to the benefit of ABHI members, and the wider health technology and healthcare industries, to promote patient safety.

Priorities

Maintain Awareness of Regulatory Landscape

- Monitor regulatory trends affecting decontamination and reprocessing to ensure ongoing, effective dialogue with key stakeholders, and to encourage internationally aligned, state of the art practices.
- Influence regulatory change and discussion by acting as subject matter expert(s).

Contribute to Standards Content Related to Decontamination and Reprocessing

- Provide a forum to discuss, interpret, and comment on key issues and communicate feedback to standards committees.

Promote and Influence Best Practices

- Share industry knowledge, support science-based best practices, and provide clear guidance to industry by organising workshops, seminars and published guidelines on key issues relating to decontamination and reprocessing.

Collaborate with Internal and External Stakeholders

- Work with other ABHI committees, external stakeholders and organisations to address common challenges and opportunities.

Support the UK as a Leader in HealthTech and Patient Safety

- Proactively monitor, identify, discuss, and take action if needed, on emerging topics relevant to the objectives of the group.

SCOTLAND

Chair: Jacqui Young, Roche
Vice Chairs: Alastair Cameron - B.Braun & Jamie Erskine - Stryker

The group works with a broad range of stakeholders to raise the profile of the sector in Scotland, identify barriers to patients accessing appropriate technologies and provide tangible solutions. It also works to demonstrate the value of the breadth of solutions available to domestic and global health systems.

Priorities

Data:
Working to create a shared Health Data Space to enable a national, integrated approach to data that supports technological, clinical and system innovations, creating health and economic benefits for Scottish citizens and businesses.

Innovation landscape:
Working to encourage streamlining and creating stronger mechanisms for measuring adoption of technologies with positive guidance. In Scotland the adoption and spread of innovation remains somewhat disjointed between the work undertaken by the Scottish Health Technologies Group and the Health Boards.

Internationalisation:
Working to showcase and raise the profile of Scottish excellence in healthcare with the global HealthTech community, while continuing to build a growing domestic industry, both through export and inward investment.

SME

Chair: Graeme Cameron, Pennine Healthcare

The ABHI SME Group has been established to provide a dedicated platform for small and medium-sized HealthTech companies to share their challenges, shape collective priorities, and ensure their voices are effectively represented within ABHI's strategic decision-making.

SURGICAL INSTRUMENTS

Chair: Daniel Coole, Surgical Holdings
Vice Chair: TBC

The ABHI Surgical Instruments group represents manufacturers of surgical instruments and associated equipment. It is designed to raise awareness of the value provided by surgical products and the importance of continual quality improvement, with a focus on patient safety and clinical performance. In working to develop and highlight best practice, the group provides a forum for its members to share insights and overcome the challenges impacting the sector.

Achievements	Priorities
Production of the Surgical Instrument Strategy document which identified three key recommendations.	To ensure this industry sector is seen as safe, accountable, professional and equitable.
Convened a virtual round table with key stakeholders to discuss the Surgical Instrument Strategy document recommendations.	To raise awareness of the value provided by surgical equipment, with a focus on patient safety and clinical performance.
Working group formed to develop an online training course.	To be inclusive of all relevant industry manufacturers e.g. single use and reusable instruments.

SUSTAINABILITY

Chair: Michelle Sullivan, Boston Scientific
Vice Chairs: Daniel Coole, Surgical Holdings

ABThe ABHI Sustainability Group recognises and agrees with the need to deliver healthcare in a more sustainable way. HealthTech presents significant opportunities to advance this goal and the industry is committed to supporting the NHS to deliver its net zero strategy. To do this, we will be a collaborative partner, delivering evidence-based and impact focused work that enhances the education of the industry, while working with all stakeholders to ensure that requirements placed on suppliers are proportionate.

We will aim to balance the patient, population and planetary needs to optimise outcomes for all.

Achievements	Priorities
Establishing a series of four areas of industry alignment around the impact of Net Zero in NHS Procurement.	Continue working collaboratively with the NHS Sustainable Procurement Team on the NHS England Net Zero Supplier Roadmap, ensuring pragmatic policies are implemented for the 2027 and 2028 milestones. The group shall continue to engage with consultations and market sounding exercises, with direct engagement between the ABHI Sustainability Group and Sustainable Procurement Team 3 times this year.
Established ABHI Sustainability as a forum for feedback to NHS England & NHS Improvement, for the proposed supplier asks and Evergreen Supplier Framework.	Following the publication of the Department for Environment, Food and Rural Affairs (Defra) Environmental Improvement Plan (EIP), engage directly with Defra on the proposed PFAS Plan and implementation of the Stockholm Convention on Persistent Organic Pollutants (POPs), responding to all consultations.
	Continue supporting the Department for Health and Social Care (DHSC) Design for Life programme, with quarterly updates from the team.
	Continue connecting with global trade associations and health systems on sustainability, highlighting the successes and challenges of implementing sustainable procurement practices in the NHS. Formally engage with the Global Medical Technology Alliance (GMTA) Sustainability Group quarterly, and host three webinars for members updating the group on advances in other countries.

VALUE & ACCESS

Commercial Policy:
Chair: Michael Cullen, B Braun
Vice Chair: Graeme Cameron, Pennine Healthcare, Matthew Bramley, Merit Medical & Stephen Sutcliffe, Boston Scientific

Market Access:
Chair: Kieran Murphy, Johnson+Johnson
Vice Chairs: David Dawson, Becton Dickinson, Jayne Bailey, Cephid & Ross Wardle, Abbott

The Value and Access group is the combined Commercial Policy group and Market Access Policy group. It brings together our work on the adoption and spread of innovation and the commercial uptake by the NHS, while allowing the specific needs of market access and procurement to be addressed. The objective of the group is to ensure that the NHS takes a value-based approach to the assessment, adoption and procurement of health technologies across the system.

Achievements

Commercial

- Delivered paper to Ministers on procurement landscape and 10 recommendations for the future requirements of NHS procurement.
- Created key commercial messages and led engagement with NHS Supply Chain on critical issues.
- Collated examples of innovations used to support the NHS during the COVID-19 crisis, which were shared with NICE, the Accelerated Access Collaborative and NHS Wales Value Based Procurement.

Priorities

Commercial

- Through the Health Technology Partnership (HTP) Procurement & Innovation Group seek solutions to procurement issues identified in the paper sent to the HTP and discussed at the subsequent OLS/DHSC/NHS England meeting.
  - Convened by NHS England participate in a deep dive with NHS Supply Chain about issues with current tendering practice and the potential for the creation of a Safe Harbour.
- Refresh and revitalise NHS Supply Chain engagement now new organisation in place, although still without a substantive Commercial Director – Operationally & Strategically.
- Engage and act of key elements of the NHS England Commercial Strategic Framework.
  - Request details on the format and execution of NHS.
  - Request involvement in category Councils.
  - Engage in workstream as detail understood.

Value & Access

- Department of Health & Social Care MedTech Strategy Engagement - Innovation & Value Based Procurement.
  - Respond to issued next draft of value based question set.
  - Support soft launch.
  - Provide feedback on how the questions are implemented in tenders.

Achievements

Market Access

- Delivered ABHI Paper to NICE on critical aspects for inclusion in the Methods and Process Review.
- Group members provided input to the NICE Methods and Process Review Task & Finish groups ensuring sector voice taken into account. The Case for Change consultation included points provided by members.
- Provided critical feedback on the MedTech Funding Mandate Policy to instigate change in the requirement for in-year savings.

Priorities

Market Access

NICE
Appraisal & Guidance Programmes.

- MultiTech evaluations, including Late Stage Assessments (LSA).
  - Respond to letter from NICE with ongoing concerns regarding LSA, including consultations on methods & process, scoping and assumed equivalence expert opinion.
  - Follow up as necessary.

- Interventional Procedure Guidance
  - Seek clarity on Terms of Reference for IPGs (bearing in mind newly implanted costs effectiveness assessments).
  - Formally request feedback on why the percentage of IPGs with special arrangements is so much higher than those with standard arrangement compared with historical ratios.

- Topic Selection
  - Following conclusion of NICE Listens work on prioritisation that will inform topic selection, review outcome of the prioritisation.
  - Initiate a formal discussion with NICE for how Topic Selection will support HealthTech resulting based on the Priorities.
  - Ensure Industry inclusion in all NICE committees.

NHS England & DHSC where relevant

- Create and share (with minimum DHSC) ABHI's innovation adoption seamless pathway and funding mechanism proposal.

Specialised Commissioning transparency and process.

- Send letter to Specialised Commissioning.
- Review and devise action plan (including escalation to the Health Technology Partnership (HTP) as appropriate) based on response from NHS England.
- Agree further action – as necessary.
- Request engagement for expediting the development of a formal process for prioritising technologies to be reimbursed where IPG status is 'Special Arrangements'.

Innovation Ecosystem Programme

- Continued engagement using the Adoption landscape paper asks as the basis to surface concerns – through year

ABHI WOUND CARE

WOUND CARE

Chair: Jonathan Marl, 3M
Vice Chair: Kirsty Hunt, HARTMANN

To represent Wound Care manufacturers to external stakeholders, to raise the profile of tissue viability as a critical service and the role that technology and industry performs in delivering patient outcomes, experience and system efficiency.

Achievements	Priorities
Utilised infographics to highlight the burden of wound care to a wide range of stakeholders including National Wound Care Strategy, NHS Supply Chain, clinical communities and NHS England.	To guide clinical and procurement decision makers to consider and evaluate whole-life system cost for wound care products versus lowest acquisition cost.
Initiated discussions with NHS England and NHS Supply chain around whole-life system cost for wound care products.	To promote value of appropriate evidence in wound management; working with clinical stakeholders to create awareness of the sector challenges.
	To support the inclusion of patient views and outcomes in decision making.
	Drive for greater alignment from key government stakeholders, including National Wound Care Strategy, NHS Supply Chain and procurement organisations.