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- | Omitting prioritisation process | Omitting prioritisation stage 1 | Not prioritised (other possible outcomes) |
|--|---|---|
| <ul style="list-style-type: none"> Medicines as per the 2024 Department of Health and Social Care voluntary scheme for branded medicines, pricing, access and growth, except there is a clear rationale not to omit the prioritisation process. Where routing decision is required for technology appraisal or highly specialised technology, it will go straight to prioritisation stage 2 Special referrals by the Secretary of State to assess health/medical technologies with a mandate Selected interventional procedures, except where ratification or further routing decision from the prioritisation board is required (go straight to prioritisation stage 2) Updates of existing guidance, except where ratification, routing decision or guidance incorporation/integration decision is required from the prioritisation board (go straight to prioritisation stage 2). | <ul style="list-style-type: none"> New topics formally notified directly from NHSE and DHSC Routing decision on technology appraisal or highly specialised technologies, as per the 2024 Department of Health and Social Care voluntary scheme for branded medicines, pricing, access and growth Updates of existing guidance that need ratification, a guidance incorporation or integration decision, or a routing decision. | <ul style="list-style-type: none"> Revisiting the topic or update later, for example, when more evidence or system intelligence becomes available Producing an alternative NICE product such as a quality standard or clinical knowledge summary Developing research recommendations Cross-referencing to suitable guidance or guideline recommendations produced by other organisations Engaging with external bodies to explore appropriate solutions (for example, the Royal Colleges, specialist societies, other arms-length bodies, or NHSE) No further action Standing down content (for updates only). |