



October 2021

## Confirmation of scope for NHSX national teledermatology investment funding

As part of the ongoing national teledermatology investment programme (NITP), we would like to confirm the position regarding the use of NHSX NITP funding for Artificial Intelligence (AI) purposes.

Where AI was specifically cited as an integral part of a project within the original Expression of Interest bid submitted to and accepted by NHSX, the use of NHSX NITP funds to pay for AI in the cited scope of the project is permitted.

If AI was **not** cited within the original Expression of Interest bid, but has been added into the scope of the project as an addition or development, the use of NHSX NITP funds to pay for AI is **not** permitted.

In either case, ICSs should follow the [AI resources](#) and guidelines set out in detail on the British Association of Dermatologists website and the associated [position statement](#).

AI has the potential to improve clinical care, optimise processes and allow greater use of clinical data to inform best practice and outcomes. AI technologies should be developed in areas which clearly address an unmet clinical need; by improving disease management and quality of care and by enhancing patient experience without compromising safety.

However, currently the evidence-base for effectiveness of AI interventions in dermatology is limited, due to studies being undertaken in artificial conditions which do not adequately reflect real-life clinical settings.

As such, any organisation looking to use AI in dermatology pathways should ensure that it has:

- undergone a thorough clinical evaluation, and conforms to the Medicines and Healthcare products Regulatory Agency regulations set out for medical devices as detailed in the position statement
- been appropriately verified by either a CE or UKCA mark and is supported by an appropriate regulatory framework. Any medical device stand-alone software, including apps intended to allow for direct diagnosis, should be classified as CE Class IIA. CE 1 mark apps should not provide decisive information for making a diagnosis. This applies even if the word 'diagnosis' is not used. Words or claims which give the impression of diagnosis, or which have a demonstrable function, are



sufficient: 'indicative diagnosis' in the context of lay usage can be sufficient that the device should have a CE Class IIA classification

[This flowchart](#) is a useful tool when considering whether to use AI in a specific dermatology setting.

Lastly, if you are using AI as part of your programme, please ensure that by the end of the programme, you submit a PowerPoint slide to the programme steering group with the following information:

- One (or more, if you have them) tangible and demonstrable benefit or impact realised by the use of AI within your project for:
  - clinicians
  - patients
  - commissioners of services

Each benefit should include statistical evidence and qualitative feedback, where possible. Please include a before and after comparison for context.

If you have any questions or ambiguity regarding a particular Expression of Interest, and whether your funding is permitted for use with AI, please contact NHSX on [dnhsx@nhsx.nhs.uk](mailto:dnhsx@nhsx.nhs.uk)

If you would like support with whether AI is appropriate to use in your dermatology project or practice in general, or with clinical evaluation or regulatory framework advice, contact the BAD's dedicated team on [ai.dermatology@bad.org.uk](mailto:ai.dermatology@bad.org.uk)

Thank you for your continued support of the programme.

NHSX Innovation Team