



Summary minutes: Sixth meeting of the National Commission into the Regulation of AI in Healthcare (20th March 2026)

Background:

The National Commission into the Regulation of AI in Healthcare was announced on 26th September 2025 as an independent, non-statutory advisory group hosted by the Medicines and Healthcare products Regulatory Agency, (MHRA). Its purpose is to advise on creating a new regulatory framework AI products in healthcare, supporting the ambition for Great Britain to be the fastest and safest place to regulate AI and software as a medical device.

The Commission will meet monthly until May 2026 and is tasked with publishing recommendations by summer 2026.

Summary of the discussion:

- The meeting opened with welcomes from the Chair and the Chief Executive Officer of the MHRA. The Chair confirmed that all four of the National Commission's working groups had recently met to discuss provider responsibilities and early access to novel AI systems, with working group chairs and MHRA officials providing updates from each working group.
- Commissioners then considered both discussion papers. These papers outlined proposals to accredit healthcare providers who can demonstrate high levels of 'AI readiness' so they can provide earlier access to AI systems and a pathway for deploying earlier-stage AI systems which maintains healthcare professionals' confidence. The Chair emphasised throughout the discussion that the proposals were intended to stimulate forward-looking discussions around the possible future regulatory frameworks but were not under active development. 'AI readiness' refers to healthcare providers being able to demonstrate that they have the systems, digital infrastructure, governance and risk frameworks and capabilities in place to deploy AI systems safely and effectively.
- Members expressed a range of views on the merits and feasibility of the proposals included in both papers. They agreed that initial work was needed to define 'AI readiness' and 'novel' AI systems, that a proportionate risk framework and incentives would be needed to help providers move through the tiers of an 'AI readiness' accreditation scheme and that enhanced Post-Market Surveillance systems that support the deployment of early-stage AI systems at scale will be needed.
- Members also noted that these proposals should not reduce responsibilities on manufacturers to ensure that their AI systems can demonstrate safety, performance and that they improve patient outcomes. They also suggested that these proposals should be designed with accelerated dispute mechanisms to ensure early access is not disrupted by long term court cases.
- The discussion closed with commissioners considering views that the development of these proposals should not be hindered by focusing on what a single, perfect accreditation scheme and deployment pathway looks like. Instead, there should a focus on derisking healthcare systems and the AI systems which have the greatest impact for patients and members of the public.



- A representative from the MHRA then provided a presentation on Pre-Determined Change Control Plans (PCCPs). A PCCP is a plan, proposed by a manufacturer, which specifies certain planned modifications to a device, methods for implementing and controlling these modifications and the assessment of impacts from these modifications. This presentation discussed some manufacturers' experiences with PCCPs and how PCCP policies and approaches could be expanded as part of a broader approach to regulating AI systems in healthcare. This presentation gave an overview of the components of PCCPs, discussed feedback from manufacturers and outlined ambitions for using PCCPs as a tool to enable innovation and ensure novel devices can reach patients faster.
- Commissioners asked several questions relating to PCCPs. These included questions relating to feedback loops and call back requirements, what performance data regulators can see through the PCCPs process and if PCCPs can be designed for categories of technology or just specific technology cases.
- Through their discussions commissioners agreed on the need to consider how Post-Market Surveillance is integrated into PCCPs to help collect evidence on performance and safety as AI system capability changes and to consider how monitoring and surveillance functions are built into AI systems which will be able to produce other types of AI system moving forward.
- The chair closed the meeting with an update on next steps with the National Commission. The included that Commissioners will meet in April to consider discussion papers on professional practice and agentic AI and in May to consider the Commission's recommendations before a report is published in early summer.
- The chair finished by thanking commissioners for their contributions and confirming that insights from the discussion would inform ongoing policy development following the National Commission's final recommendations.



Attendance:

Professor Alastair Denniston (Chair), Professor of Regulatory Science and Innovation, University of Birmingham; Honorary Consultant Ophthalmologist, University Hospitals Birmingham NHS Foundation Trust; Executive Director, Centre of Excellence for Regulatory Science in AI & Digital HealthTech (CERSI-AI)

Professor Henrietta Hughes (Deputy Chair and Chair of Health Systems Working Group), Patient Safety Commissioner

Professor Cathie Sudlow (Chair of Devolved Authorities Working Group), Head of School of Population Health Sciences, University of Edinburgh and Director of UKRI Adolescent Health Study

Dr Brian Anderson, Chief Executive Officer, Coalition for Health AI (CHAI)

Dr. Ricardo Baptista Leita, CEO, HealthAI - The Global Agency for Responsible AI in Health

Adj. Prof. Raymond Chua, Chief Executive Officer, Health Sciences Authority; Deputy Director-General of Health (Health Regulation), Ministry of Health (Singapore)

Dame Jennifer Dixon, Chief Executive, The Health Foundation

Dr Paul Goldsmith, Non-Executive Director MHRA; Chair, MHRA's Regulatory and Safety Committee; visiting Professor, Institute of Global Health Innovation, Imperial College London; Consultant Neurologist, Clinical Senate

Dr Vish Ratnasuriya MBE, General Practitioner; Chair, Our Health Partnership; Co-Founder, Primary Care Accelerator; Honorary Associate Professor, University of Birmingham

Dr Gabriella Spinelli, Director, RADIANT-CERSI Centre for Regulatory Science & Innovation in Digital Health & Healthcare AI, Brunel University London

Dr Barry Stein, Chief Clinical Innovation Officer; Chief Medical Informatics Officer; Founder, Centre for AI Innovation in Healthcare; Attending Vascular and Interventional Radiologist, Hartford HealthCare, Connecticut, USA

Professor Richard Susskind CBE KC, President of the Society for Computers and Law, Special Envoy for Justice and AI to the Secretary General of the Commonwealth

Apologies:

Professor Neil Lawrence (Chair of Technology Working Group), DeepMind Professor of Machine Learning, University of Cambridge; Chief Scientist, Trent AI

Mr Richard Stubbs, Chief Executive, Health Innovation Yorkshire & Humber