**National Institute for Health and Care Excellence**

Senior Management Team

# Minutes of the meeting held on 7 July 2020

## Present

Gill Leng Chief Executive

Meindert Boysen Director – Centre for Health Technology Evaluation

Paul Chrisp Director – Centre for Guidelines

Jane Gizbert Director – Communications

Judith Richardson Acting Director – Health and Social Care

Alexia Tonnel Director – Evidence Resources

Catherine Wilkinson Acting Director – Business Planning and Resources

## In attendance

David Coombs Associate Director – Corporate Office (minutes)

Nick Crabb Programme Director – Science Advice and Research

James Fitton Management Accountant (item 6.1)

Fiona Glen Programme Director – Centre for Guidelines (items 6.1 and 6.2)

Grace Marguerie Associate Director – HR (item 6.4)

Eric Power Programme Director – Medicines and Quality (item 6.3)

Toni Tan Senior Technical Adviser – Centre for Guidelines (item 6.2)

Nichole Taske Associate Director – Centre for Guidelines (item 6.2)

Sarah Woodhead Apprenticeships and Training Coordinator (item 6.4)

## Apologies (item 1)

1. None.

## Declarations of interest (item 2)

1. The previously declared interests were noted. There were no conflicts of interest relevant to the meeting.

## Notes of the previous meeting (item 3)

1. The minutes of the meeting held on 30 June 2020 were agreed as a correct record.

## Matters arising (item 4)

1. The actions from the meeting held on 30 June 2020 were noted as complete or in hand.

## Coronavirus (item 5)

1. SMT confirmed the decision at the gold group to approve the health and safety business and office risk assessment, which should be reviewed and updated at the end of September before some staff are able to return to the office from the beginning of October.

## Developing, maintaining and updating COVID 19 guidelines: proposed operational structure and costs (item 6.1)

1. Fiona Glen presented the proposed operational structure and the associated costs for responding to the request from NHS England and NHS Improvement (NHSE&I) for NICE to maintain a single integrated, up-to-date, suite of guidance on the clinical management of COVID-19, bringing together NICE’s and NHSE&I’s work in this area. The proposal entails a different operating model from NICE’s standard guideline development, with a single unit that will develop, carry out surveillance on, and regularly update COVID-19 guidelines. The majority of staff for the unit would be seconded from other roles, with recruitment required for 5 additional roles.
2. Catherine Wilkinson highlighted that SMT will need to take a risk-based decision on whether to go ahead with the recruitment before additional funding has been provided for this work. She noted that SMT have taken similar decisions in the past, including for example to expand the MedTech programme before additional funding was confirmed.
3. Gill Leng confirmed that she is in dialogue with the senior departmental sponsor at the Department for Health and Social Care (DHSC) about the scope for additional resources, including the potential to access the COVID-19 funding available for the health system.

ACTION: GL

1. SMT reviewed the proposals and agreed the operating structure. SMT noted this was an important area of work supported by the Board, and agreed the recruitment should take place prior to the confirmation of any additional funding. SMT noted that if additional funding is not forthcoming, then the mitigations would include managing vacancies across the organisation in 2020/21 and prioritising activities as part of the 2021/22 business planning. It was agreed that Fiona would discuss the secondment arrangements with Grace Marguerie, including which staff would be eligible to apply. It was agreed that the secondment arrangements should also give flexibility for staff to remain in the new roles if the model continues in the longer-term.

ACTION: FG/GM

## Interim process and methods for guideline development in response to public health emergencies (item 6.2)

1. Toni Tan presented the interim process and methods for guideline development in response to public health and care emergencies. The proposals preserve the responsiveness required for urgent guideline development while enhancing transparency and methodological rigour in line with the NICE Principles and internationally recognised standards for guideline development, including in response to public health emergencies. It is proposed that the interim process and methods are subject to ongoing review and update, prior to public consultation in 2021/22.
2. SMT discussed the role of the independent expert panel and how this relates to the commitment in the NICE Principles to use independent advisory committees when developing guidance. SMT noted that due to the speed for developing these guidelines, it was not possible to use an advisory committee. However, the proposals seek to apply the relevant aspects of a committee as far as possible, such as the independent external input and the application of the declarations of interest policy. It was agreed that it would be helpful to add a statement in the document to note that the independent expert panel will perform the role of the independent advisory committee in standard guidance development and that the declarations of interest policy applies to staff and panel members.
3. In addition, it was agreed that the methods and process should include a cross-reference to the work in the Centre for Health Technology Evaluation, to ensure NICE’s outputs on new technologies feeds into the guideline surveillance process.
4. Subject to these amendments, SMT agreed that the methods and process should be added as an appendix to the main guideline development manual, with an amended title to note they could be used whenever there is an urgent need to develop guidelines rapidly. It was agreed that the methods and process should be kept under review and subject to a public consultation in 2020/21.

ACTION: PC

1. SMT agreed that the Board should receive an update on the methods and process to inform a strategic discussion on how NICE evolved the standard guidance development approach to respond to the urgent request to develop guidelines in the pandemic, and the proposed next steps in undertaking a public consultation in 2021/22. It was agreed that Paul Chrisp and Gill Leng would consider the appropriate forum and timing for this Board discussion.

ACTION: PC/GL

## Proposed structural changes to the Health and Social Care Directorate (item 6.3)

1. Judith Richardson presented the paper that set out proposed structural changes to the Health and Social Care directorate alongside the transfer of the medicines programme to the Centre for Guidelines as part of longer-term plans to effectively support content development and meet the aims of NICE Connect. The paper also set out a proposal to seek expressions of interest from staff to fill the 2 programme director roles that are currently covered on a temporary basis.
2. SMT discussed and approved the proposed structural changes, along with the medicines programme’s transfer to the Centre for Guidelines on 1 August.
3. SMT discussed the 2 programme director roles and the implications of the Board’s decision to defer a decision on reconfiguring the Health and Social Care Director role until the 5-year strategy is developed. SMT agreed that in order to provide stability to the affected staff, it would be appropriate to substantively recruit to the system support and evaluation programme director role, with the current acting programme director to continue until the new appointee is in post. It was agreed that the leadership and engagement programme director role should continue to be filled on an acting basis until 31 March 2021 as it is Judith Richardson’s substantive position, with expressions of interest sought.

ACTION: JR

## Apprenticeship recruitment and induction for 2020/21 (item 6.4)

1. Grace Marguerie presented the paper that asked SMT to agree the approach to apprenticeship recruitment and induction in 2020/21 in the context of the current home working.
2. SMT discussed the challenges posed by the current home working, both in terms of the apprentices’ potential working environment at home and whether it would be possible to provide them with the required support in what may be their first employment. SMT therefore supported option 1 in the paper, which is to recruit apprentices with a proposed start date of January 2021 when there is hoped to be a small staff presence in the office to provide some in-person support. It was agreed that teams could however recruit apprentices sooner if there are strong business reasons to do so, the relevant manager is able to provide sufficient enhanced support remotely, and the candidate is suited to home working. SMT agreed that ideally, any such recruitment would be in cohorts so the apprentices could provide peer support.

## EU exit (item 7)

1. Nick Crabb noted that engagement with the MHRA on the national licensing system is underway, overseen by the core strategic group.
2. It was noted that a further update on EU exit will be provided to the Board in August.

ACTION: NC/MB

## London office move (item 8)

1. There was no update to discuss.

## Any other business (item 9)

1. SMT briefly discussed the arrangements for the Board meetings on 15 July. Gill Leng noted that the Chairman would like presentations to be circulated to the Board in advance so the Non-Executives can prepare their input to the discussions. SMT therefore agreed that presentations, other than from external speakers, should be submitted to the Corporate Office by lunchtime on the Monday preceding the Board meeting so these can be circulated to the Board at least a clear day before the Board meeting.

ACTION: SMT/DC

1. Paul Chrisp noted that the Independent Medicines and Medical Devices Safety Review is due to publish on 8 July and briefly summarised the areas covered by the recommendations, along with the potential implications for NICE. It was agreed that appropriate communications should be prepared to accompany the report’s publication. In addition, Gill Leng stated that she would ask Kevin Harris, as NICE’s patient safety lead, to bring a paper to SMT on 21 July that summarises the recommendations and implications for NICE.

ACTION: GL/KH