**National Institute for Health and Care Excellence**

Executive Team

# Minutes of the meeting held on 10 August 2021

## Present

Gill Leng Chief Executive

Paul Chrisp Director, Centre for Guidelines

Jane Gizbert Director, Communications

Felix Greaves Director, Science, Evidence and Analytics

Jennifer Howells Director, Finance, Strategy and Transformation

Judith Richardson Acting Director, Health and Social Care

## In attendance

Jeanette Kusel Director – Scientific Advice

Alison Liddell Programme Director – DIT Strategy and Governance

Rebecca Threlfall Chief of Staff

Elaine Repton Corporate Governance and Risk Manager (minutes)

Helen Knight Programme Director – Technical Appraisals and Highly Specialised Technologies (item 5.1)

Jenniffer Prescott Programme Director – Planning and Operations (item 5.1)

Nick Crabb Programme Director – Scientific Affairs (item 6.1)

Pilar Pinilla-Dominguez Principal Scientific Adviser (item 6.1)

Deborah Lee Senior Project Manager - Scientific Advice (item 6.1)

## Apologies (item 1)

1. Apologies were received from Meindert Boysen and Alexia Tonnel who were represented by Jeanette Kusel and Alison Liddell respectively.

## Declarations of interest (item 2)

1. The previously declared interests were noted. Jeanette Kusel declared a new interest relating to her partner’s new role at the contract research organisation PPD, which works in the area of clinical trials.

## Notes of the previous meeting (item 3.1)

1. The minutes of the meeting held on 3 August 2021 were agreed as a correct record subject to an amendment to paragraph 25 to state that Gill Leng had asked to check the final GIN conference presentations not submissions.

## Matters arising (item 3.2)

1. The actions from the meeting held on 3 August 2021 were noted as complete or in hand.
2. Judith Richardson advised that the HEE had agreed to include a strategic partnership opportunity in their CSR bid, to work with NICE on guidance implementation through HEE’s learning tools. Judith agreed to provide Jane Gizbert with further details to ensure any communications were positioned correctly.

**ACTION: JR**

1. Gill Leng requested final sign off on the patient safety paper to the September board meeting.

**ACTION: JR**

1. Jennifer Howells gave an update on the skills mapping work following the feedback from the SLF meeting. The work was being commissioned externally with a view to presenting a paper to the October board strategy meeting.
2. ET also noted progress with the ‘world of work’ commission which has been awarded to Deloitte and will commence on 16 August to meet the timescale of a report to ET on 21 September and then potentially to the October board strategy meeting. Deloitte had requested a 30 minute session with ET on 24 August to gain initial feedback on NICE’s requirements, and to offer a webinar to staff on the afternoon of 24 August for those who are available and interested in attending. ET acknowledged that it was holiday season but hoped that a sufficient number of staff would be available to provide their views. Jennifer advised that an article will be included in YW@N to publicise the event and agreed to share the draft communication with Gill Leng beforehand.

**ACTION: JH**

## Hot topics (item 4)

1. **October board strategy day** – ET reviewed the draft agenda for the October board meeting which will focus on the future operating model for technology evaluation and guideline development, strategic partnerships and an overview of the NHS’s priorities from an external guest. Gill Leng agreed to re-order and re-frame the agenda based on the discussion. The best way to include information from the ‘world of work’ and skills mapping analysis will be discussed at the August ET retreats.

**ACTION: GL**

1. **Market withdrawal** – ET discussed the withdrawal of a company from the UK and European pharma market and the implications of their decision for an ongoing gene therapy appraisal. It was agreed to defer a full discussion of the preferred course of action on publication of relevant guidance to Guidance Executive, and to ensure the comms team was briefed on the outcome.

**ACTION: HK/JG**

1. ET discussed the potential re-structuring of a strategic partner and considered whether there would be implications / opportunities for NICE in relation to future skills requirements. Gill Leng requested a briefing note from Nick Crabb for her upcoming meeting with the respective CEO. This would also be a discussion topic for the board to board meeting in October.

**ACTION: NC/GL**

1. **CSR bid** – Jennifer Howells gave an update on progress with the CSR bid. The evidence packs were being developed for the transformation work and life sciences hub, which will be submitted to Liz Woodeson for review ahead of the 26 August deadline. Gill Leng requested a briefing note ahead of her meeting with Liz on 11 August.

**ACTION: JH/MD**

1. **Collaborating centres tender** – Paul Chrisp reported that the guideline development tender had failed, and that the proposal was to have a further procurement exercise in mid-October for an interim 12-18 month arrangement, which would allow time to agree a transition plan and have discussions about the longer term strategic direction. ET noted the potential TUPE implications if an interim arrangement is not agreed. Discussions will be taking place with the collaborating centre leads in the coming weeks.

## Centre for Health Technology Evaluation – methods, process and topic selection consultation (item 5.1)

1. Helen Knight and Jenniffer Prescott joined ET to ask for input into the proposed questions to be asked in the CHTE methods, processes and topic selection consultation documents. ET agreed a ‘lay summary’ at the front of each of the three sections would be helpful. Jane Gizbert advised this work was in hand plus an overview for the press release.
2. ET also suggested including further explanation of the ‘severity modifier’ compared to end of life, and what exactly is meant by ‘unmet need’.

**ACTION: HK/JP**

1. ET discussed whether this was the opportunity to re-set topic selection which is currently industry driven, to being a more health system-led approach. Helen advised that this was not part of the consultation, but was being addressed through the contingent approvals route.

## NICE International Strategy (item 6.1)

1. ET reviewed a draft 3-year strategy for NICE International which is planned for submission to the private board meeting in September. Views were expressed on the importance of NICE International and its fit within the strategic plan. For the paper to the board, the team was asked to include some context for the new NEDs to explain that the strategy was building on an existing platform of work and its importance to NICE in terms of collaborating with partners, but to reduce the overall level of detail.

**ACTION: NC/PPD**

1. ET sought clarity on the scope and remit of some of the proposed projects which cross-over with other centres’ priorities eg “to drive collaboration with HTA and guideline developers”. It was confirmed that NICE International’s role would be convening and supporting this work, not leading.
2. It was queried how NICE International’s costs were recovered, how it benefitted NICE’s wider work and how the value for the UK taxpayer was measured, in comparison to NICE’s collaborations with the devolved administrations. Pillar Pinilla-Dominguez agreed to look at developing a set of indicators and measures.

**ACTION: PPD**

1. The paper proposed the creation of an external international advisory group and included a draft terms of reference, with membership of the group to include two NEDs. ET considered whether this was the right role for NEDs to be focussing on. It was agreed that the ToR needed to be re-focussed to be clear that it’s an external advisory group to support NICE’s international work at an operational level, with no decision making powers.

**ACTION: JK/NC/PPD**

1. ET agreed it would be useful to have an overview of the various external advisory groups within NICE. It was noted that this will form part of the new Strategic Implementation role, which it was agreed to discuss further at the August ET retreat.

**ACTION: RT**

## Review of the meeting (item 7)

1. No comments.

## Other business (item 8)

1. **Manchester office facilities** – It was noted that the small meeting pods in the Manchester office were currently out of use. It was thought this was a temporary precautionary measure whilst the facilities team awaited CO monitors to check the ventilation in the confined spaces. An option would be to remove the doors to increase the air flow. Jennifer Howells agreed to ask for an update from facilities.

**ACTION: JH**