**NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE**

Public Board Meeting - Meeting as the Board Committee   
held on 20 May 2020 via Zoom

These notes are a summary record of the main points discussed at the meeting and the decisions made. They are not intended to provide a verbatim record of the Board’s discussion. The agenda and the full documents considered are available in accordance with the NICE Publication Scheme.

# Board members present

Professor Tim Irish Interim Chair

Professor Martin Cowie Non-Executive Director

Elaine Inglesby-Burke Non-Executive Director

Dr Rima Makarem Non-Executive Director

Tom Wright Non-Executive Director

Professor Gillian Leng Chief Executive

Meindert Boysen Deputy Chief Executive and Centre for Health Technology Evaluation Director

Paul Chrisp Centre for Guidelines Director

Alexia Tonnel Evidence Resources Director

Catherine Wilkinson Acting Business Planning and Resources Director

# Directors in attendance

Jane Gizbert Communications Director

Judith Richardson Acting Health and Social Care Director

# In attendance

David Coombs Associate Director – Corporate Office (minutes)

Nick Crabb Programme Director – Science Advice and Research

# 20/040 Apologies for absence

1. Tim Irish noted the apologies from Sharmila Nebhrajani who takes up the position of NICE Chairman next week.

# 20/041 Declarations of interest

1. The previously declared interests recorded on the register were noted and it was confirmed there were no conflicts of interest relevant to the meeting.

# 20/042 Minutes of the last meeting

1. The minutes of the Board meeting held on 25 May 2020 were agreed as a correct record.
2. The Board reviewed the actions arising from the public Board meeting held on 25 March 2020 and noted that:

* Work on the proposed changes to the topic selection processes for guidance produced by the Centre for Health Technology Evaluation (CHTE) and the prioritisation of activities in the Centre for Guidelines continues in advance of future consultation and stakeholder engagement.
* Revised equality objectives will be brought to the Board in September as part of the annual equality report.
* The time limited committee of the Board is now in operation, and would cease to exist once Sharmila Nebhrajani is in post as Chairman on 25 May 2020 and the number of non-executives returns to the minimum required by the Health and Social Care Act 2012.
* The Chief Executive’s Board report now includes actions for NICE arising from HM Coroner’s regulation 28 reports.

# 20/043 Chief Executive’s report

1. Gill Leng presented the Chief Executive’s report which provided an update on the outputs from the main programmes for the 12 months to the end of March 2020 together with information on other matters of interest to the Board. Gill noted that the report follows the structure of the previous Chief Executive’s reports, but she will review the format for this and the other Board reports with the new Chair. Gill highlighted NICE’s response to the COVID-19 pandemic and thanked staff, in particular those who worked on the rapid guidelines and the Research to Access Pathway for Investigational Drugs in COVID-19 (RAPID-C19).
2. Board members praised NICE’s response to COVID-19 and congratulated Gill for a positive start as Chief Executive in such challenging circumstances. Board members asked about NICE’s planning for the ‘new normal’, including whether the plans for NICE Connect have changed and how NICE will support social care in light of the challenges experienced by the sector in recent weeks. In response, Gill confirmed that the intention is to capture the learning around the rapid COVID-19 guidelines and feed this into the approach to standard guidance production, in particular how guidance can be produced quickly. Gill highlighted that NICE remains keen to support the social care sector but was not commissioned to produce any COVID-19 guidelines specifically focused on social care. Existing guidance was therefore re-presented for a social care context, including for example around infection control.
3. In response to a question from the Board, Gill Leng and Meindert Boysen provided further information about the delays to guidance production noted in the report. In some programmes, the variation against plan was due to the decision to focus on topics that were either therapeutically critical or COVID-19 related. The position in the technology appraisals programme is more complex and reflects a broader range of factors. Meindert stated that he will be exploring alternative methods of reporting performance to the Board, as focusing solely on published outputs does not reflect the level of activity and productivity.
4. The Board received the report.

# 20/044 Resources report

1. Catherine Wilkinson presented the report which outlined the financial position at 31 March 2020 and the potential impact of COVID-19 on the 2020/21 budget and workforce plan. The final out-turn position for 2019/20 was an underspend of £0.4m which satisfies the statutory duty to breakeven or better. In relation to 2020/21, the current assumption for planning purposes is a budget deficit of £0.4m, although in the worst-case scenario this could rise to £2.1m depending on the level of reduction in income from the technology appraisals programme. It is likely that NICE could identify savings to balance the budget in the event of the £0.4m deficit. Should income reduce to the greater extent that has been modelled then support will likely be required from the Department for Health and Social Care (DHSC). Catherine highlighted the support for staff around COVID-19, including the regular staff surveys and the digital marketplace to match skills and capacity to areas in the business where extra resource is needed.
2. In response to questions from the Board, Catherine Wilkinson and Gill Leng confirmed that the longer-term implications for the way staff work are being explored, including both at home and in the future return to working in the offices.
3. The Board received the report.

# 20/045 Business plan 2020/21

1. Gill Leng presented the proposed business plan for 2020/21 which has been updated to reflect the implications of the COVID-19 pandemic. As this impact across the year is uncertain, the plan sets out indicative objectives and forecast outputs. The plan also notes the changes in the operating environment as a result of COVID-19, although this continues to evolve. Given this uncertainty, the proposal is to approve the plan in its current format, and then develop a new strategic plan for NICE over the summer which would set the context for next year’s business plan, which will likely look different to this one.
2. On this basis, the Board approved the business plan subject to adding further information on NICE’s role in relation to social care. The Board delegated approval of these changes and any final amendments following review by the Senior Departmental Sponsor at the Department of Health and Social Care to the Chief Executive.

Action: Gill Leng

# 20/046 Collaboration with the Medicines and Healthcare products Regulatory Agency (MHRA)

1. Nick Crabb presented the paper that outlined the terms of reference, membership, and initial priorities of a strategic group to take forward the priorities identified in meetings between the two organisations’ chief executives. The group is one area of collaboration between the two organisations and does not encompass the totality of the partnership working.
2. The Board discussed and supported the collaboration set out in the paper. The importance of remaining mindful of the purpose of the collaboration – to ensure patients can access innovative treatments as quickly as possible, providing they are safe – and engaging key stakeholders, including patient groups, in the workstreams were highlighted. The need to also include the NIHR and NHS England and NHS Improvement in this work was also noted, given their respective roles in relation to research and patient access.
3. Comments were received from members of the audience about this work, including the need to link it to the NICE Connect transformation. In response to a question from the audience, Nick Crabb confirmed that the life sciences industry will be engaged at a suitable point in workstream 4 which seeks to develop an end to end national process for medicines.

# 20/047 Audit and Risk Committee minutes

1. Dr Rima Makarem, chair of the Audit and Risk Committee, presented the unconfirmed minutes of the committee’s meeting on 22 April 2020. The committee noted the annual report from internal audit and the head of internal audit opinion of ‘moderate assurance’ for the 2019/20 year. Internal audit noted the scope for improvements in the arrangements for NICE senior management to be assured of compliance with established policies and procedures, as highlighted in the reports on contract management, conflicts of interest, and travel bookings. The work on the annual report and accounts is progressing well, with arrangements in place for external audit to undertake their work remotely. It is anticipated that NICE will be able to complete the annual report and accounts in line with the timetable in place prior to the COVID-19 disruption.
2. The Board received the unconfirmed minutes.

# 20/048 Audit and Risk Committee annual report and terms of reference

1. Dr Rima Makarem presented the annual report from the Audit and Risk Committee, which summarised the committee’s work during the year. The report also noted that the committee has reviewed its terms of reference and do not propose any amendments to these.
2. The Board received the report and agreed no amendments were required to the committee’s terms of reference.

# 20/049 Risk management policy

1. Catherine Wilkinson presented the updated risk management policy following its periodic review. The Audit and Risk Committee had reviewed and supported the proposed updated policy.
2. Board members reflected on the changes to the policy in the context of the unforeseen challenges arising from the COVID-19 pandemic. The proposed changes to the risk appetite were welcomed, which were noted to be consistent with NICE’s response to the pandemic. The rapid development of new products demonstrated the organisation’s ability and willingness to take risks and innovate. The importance of communicating this risk appetite to key stakeholders was highlighted. It was noted that the work to develop a strategic plan will provide the opportunity to communicate and test the risk appetite, and ensure the appropriate mitigations are in place for the key strategic risks.
3. The Board approved the updated risk management policy, subject to including a reference to ensuring the risk management process includes learning from unforeseen events.

Action: Catherine Wilkinson

# 20/050 Director’s report for consideration

1. Alexia Tonnel presented the update from the Evidence Resources Directorate and highlighted key points of note including the Directorate’s support for NICE’s response to the COVID-19 pandemic. In particular, the Information Services team has been heavily involved in the production of the rapid COVID-19 guidelines by searching for and sourcing underpinning evidence, and the IT and Digital teams have reprioritised their work to facilitate remote working for staff and enable the running of virtual committees. Alexia also noted the Directorate’s work with CHTE and NHS England on the evaluation of digital health technologies.
2. The Board noted the report and thanked Alexia for the Directorate’s work. The need to ensure appropriate balance between internally and externally focused digital and IT projects when setting priorities was highlighted.

# 20/051 – 20/054 Directors’ reports for information

1. The Board received the Directors’ reports for information from the Centre for Guidelines, Centre for Health Technology Evaluation (CHTE), Communications Directorate, and Health and Social Care Directorate.
2. Paul Chrisp thanked staff across NICE for their contribution to the COVID-19 rapid guidelines. In response to a question from the Board, Paul provided an update on the position with the diagnosis and management of abdominal aortic aneurysms (AAA) guideline. He noted that the stakeholder response to the guideline and the changes made by NICE to the recommendations developed by the guideline committee has been positive. Members of the committee did raise concerns about the amendments, but there have been no wider concerns raised by other advisory committees about the implications for their work.
3. Meander Boysen highlighted CHTE’s work on the second phase of the response to COVID-19, including the support for Public Health England on testing, and the development, jointly with the MHRA and NIHR, of a guide to evidence collection for developers of medicinal products for the treatment or prevention of COVID-19.
4. Board members highlighted the importance of seeking feedback from staff about NICE’s response to COVID-19 and using the new ways of working to inform the NICE Connect transformation. In response, it was noted that the next regular staff survey will seek feedback on what NICE could start, stop, and continue. Linked to this, Judith Richardson noted that the Health and Social Care Directorate will be seeking feedback from partners on how NICE can most add value.
5. Questions were received from the audience about future guidelines activity, including whether diabetes guidelines will be prioritised for update in light of recent data that shows links between diabetes and heightened risk from COVID-19. Paul stated that as the pipeline of new COVID-19 rapid guidelines is ending, work on non-COVID-19 related topics can resume. Criteria have been developed to inform this prioritisation, which include topics that relate to vulnerable non-shielded groups. In addition, he noted that a key area of work will be to keep abreast of new evidence on COVID-19 and use this to update NICE’s guidance as appropriate.

# 20/055 Any other business

1. Tim Irish noted that the last public Board meeting was held at the start of the pandemic and congratulated senior management and staff for their response to COVID-19 which he felt to be a credit to the organisation. As noted in earlier discussions, it is important to use this as an opportunity for positive change in the way the organisation works.
2. Gill Leng noted this was Tim’s last meeting as Interim Chair and thanked him for his stewardship while in the role.

# Next meeting

1. The next public meeting of the Board will be held on 15 July 2020 at 1.30pm via Zoom.