

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Minutes of the Board Strategy Meeting held on 25 April 2018 in the
Derwent meeting room, NICE London office

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.

Present

Non-Executive Directors

Professor David Haslam
Professor Sheena Asthana
Dr Rosie Benneyworth
Professor Angela Coulter
Professor Martin Cowie
Elaine Inglesby-Burke
Professor Tim Irish
Dr Rima Makarem
Tom Wright

Executive Directors

Sir Andrew Dillon
Ben Bennett

Directors in attendance

Mirella Marlow
Alexia Tonnel

In attendance

Dr Jane Adam
Dr Peter Groves
Professor Susan Jebb
Professor Danny Keenan
Dr Hugh McIntyre
Norma O'Flynn
Moya Alcock
Dr Paul Chrisp
Christine Carson
David Coombs (minutes)
John Davidson (item 6)

Apologies (Board and Senior Management Team) (item 1)

- 1 Apologies were received from Professor Mark Baker, Professor Gillian Leng, and Jane Gizbert.

Declarations of interest (item 2)

- 2 Martin Cowie noted his appointment by the Singapore government to periodically review Singaporean cardio vascular services, and also as associate editor of JACC (Journal of the American College of Cardiology). He would update his declaration of interest accordingly.
- 3 Hugh McIntyre noted that he is writing a dissertation on social value judgements.

Minutes of February 2018 Board Strategy meeting (item 3)

- 4 The minutes of the Board Strategy meeting on 21 February 2018 were agreed as a correct record.

Matters arising (item 4)

- 5 The Board reviewed the actions arising from the Board Strategy meeting on 21 February 2018. It was noted that:
 - The intranet information governance (IG) training was developed for NICE staff, and is not directly applicable to the work of the advisory committees. The Senior Management Team felt, on reflection, it would be more appropriate for committee members to access such training through their principal employer where available.
 - The draft business plan had been amended in response to the Board's feedback, and subsequently approved at the Public Board meeting on 21 March.
 - A project group has been established to undertake an exploratory review of the case for establishing the NICE Foundation. The project group has met twice and plans to submit its report to the Board in June.

Chief Executive's update (item 5)

- 6 Andrew Dillon updated the Board on a number of matters, notably the appointment of Meindert Boysen as the new Centre for Health Technology Evaluation (CHTE) Director following a competitive recruitment process. The appointment is effective from 1 May 2018, and it is now a priority to appoint Meindert's successor as Programme Director responsible for the technology appraisal and highly specialised technologies programmes, and the new Programme Director role focused on commercial negotiations with the life sciences industry and NHS England.

- 7 Andrew fed back from a number of meetings with different stakeholders, including a meeting with the chairs of the panels that hear appeals against NICE's technology appraisal and highly specialised technologies guidance; the latest of the regular meetings between the Chief Executives of NICE, NHS England, NHS Improvement, Public Health England, Health Education England, Care Quality Commission and Local Government Association; and from a series of individual meetings with 12 US-based life science companies with business in the UK in New York last week. Andrew also briefly highlighted other points of note, including the project group that is developing a paper to the Board on the case for establishing the NICE Foundation; NICE's application to become a Stonewall diversity champion to increase the support to LGBT staff; the actions planned to mitigate the risks of staff accessing cloud based Software as a Service (SaaS); and the local elections on 3 May.
- 8 The Board noted the plans for marking the 70th birthday of the NHS, which were discussed at the recent national Chief Executive's meeting. Board members welcomed the proposal to utilise NICE's work to demonstrate how treatment has changed since the NHS' establishment in 1948, supported by evidence-based guidance. It was suggested this could also look forward to how care may further evolve in coming years, for example through the use of digital technologies.
- 9 The feedback from the meetings with the life sciences industry was noted, in particular the comments on the adoption of technologies into the health and care system following a positive NICE recommendation, and the potential need to evolve NICE's methods and processes in order to evaluate new types of technology.
- 10 The Board thanked Mirella Marlow for her work as acting CHTE Director and congratulated Meindert Boysen on his appointment.

Draft annual report and accounts (item 6)

- 11 John Davidson presented the draft (version 1) of the 2017/18 annual report and accounts, and asked for the Board's feedback. Andrew Dillon outlined the context and reminded the Board of the decision to include more information about NICE's work in the annual report, and present this in a more accessible format similar to that used for the online annual review.
- 12 Board members welcomed the revised approach and made a number of suggestions for the next draft, including to add information on NICE's role in accelerating access to new technologies, Carole Longson's departure, and the restructure of the Centre for Health Technology Evaluation. The budget impact test should be explained more fully, along with the respective roles of NICE and NHS England in commercial negotiations with the life sciences industry. It was suggested that the report should feature examples of the contribution of NICE staff, and also

provide information on areas of NICE's work where there is scope for further improvements. The innovative approach for presenting NICE's anti-microbial prescribing guidance should also be highlighted.

- 13 It was noted that these comments will be incorporated into the next draft (version 2), which will be reviewed by the Senior Management Team and the National Audit Office, after which version 3 will be produced for review and approval by the Audit and Risk Committee and Board in June.

ACTION: Jane Gizbert

Policy on declaring and managing interests for Board members and employees (item 7)

- 14 Andrew Dillon presented the proposed new policy for declaring and managing interests for Board members and employees. The policy has been reviewed by the Senior Management Team (SMT) and shared with Unison representatives for comment. It is now presented for the Board's approval. It seeks consistency with the new policy for advisory committees where appropriate.
- 15 The text in paragraph 16 of the policy regarding non-financial professional and personal interests was discussed. It was agreed that whilst the requirement to declare holding office in the stated organisations was appropriate, the text, which had been taken from the advisory committee policy, should be revised to better reflect this policy's focus on staff and Board members. It was also noted that whilst holding such interest should be declared, it would only present a conflict of interest if there is a perceived risk to the person's objectivity as outlined in the policy.
- 16 Subject to the above amendment, the policy was approved for implementation from 1 May 2018.

ACTION: Andrew Dillon

Committee chair update (item 8)

- 17 Professor Danny Keenan, chair of the Indicator Advisory Committee, gave a presentation on the Committee's work. NICE indicators are used in three national frameworks: the Quality and Outcomes Framework (QOF), CCG Outcomes Indicator Set (CCG OIS), and CCG Improvement and Assessment Framework (CCG IAF). They can also be used to underpin local quality improvement activity and audits. In summary, the Committee's role is to assist in prioritising potential indicators and topics for further development; recommend indicators for publication on the NICE menu; and review existing indicators. NHS

England and the British Medical Association agree which of the indicators in the NICE menu are adopted into the QOF.

- 18 Professor Keenan outlined the Committee's current and ongoing activities on frailty and multimorbidity. He also noted that whilst to date the Committee has focused on general practice and commissioning level indicators, it is increasingly exploring prevention work and moving beyond health, reflecting NICE's wider remit. This will be taken into account in the Committee's recruitment, including for example to ensure access to public health expertise.
- 19 The issues around multimorbidity were discussed, noting the prevalence across the population. It was suggested that it would be helpful for the Senior Management Team to reflect on how NICE's methods and processes may need to evolve to help the health and care system address the long term strategic challenge of multimorbidity. It was agreed this is something the new Centre for Guidelines Director should address as an early priority.
- 20 NICE's expertise in developing indicators was noted and welcomed, together with the value of this work on quality improvement. The potential scope to develop indicators for other parts of the health and care system, both in the UK and internationally, was noted.
- 21 On behalf of the Board, David Haslam thanked Professor Keenan for the Committee's work.

Any other business (item 9)

- 22 None

Date of the next meeting

- 23 The next Board strategy meeting will be on Wednesday 20 June 2018 in the Derwent room, NICE offices, London.