NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Minutes of the Board Strategy Meeting held on 13 December 2017 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
Dr Rima Makarem
Tom Wright

Executive Directors
Sir Andrew Dillon
Professor Gillian Leng
Ben Bennett

Directors in attendance
Professor Mark Baker
Jane Gizbert
Alexia Tonnel

In attendance
Dr Peter Groves
Dr Peter Jackson
Professor Paul Lincoln
Norma O’Flynn
Professor Andrew Stevens
David Coombs (minutes)
Mirella Marlow (for Professor Carole Longson)

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

1 Apologies were received from Elaine Inglesby-Burke, Professor Tim Irish, and Professor Carole Longson.

Declarations of interest (item 2)

2 None.
Minutes of August 2017 Board Strategy meeting (item 3)

3 The minutes of the Board Strategy meeting on 16 August 2017 were agreed as a correct record.

Matters arising (item 4)

4 The Board reviewed the actions arising from the Board Strategy meeting on 16 August 2017. It was noted that:

- Outside of the IAPT programme NICE has not been commissioned to systematically evaluate digital health ‘apps’.
- The opportunity to utilise the GIRFT programme to provide clinical input to the innovation scorecard is being explored.
- The actions taken in response to the staff survey will be promoted through a series of communication channels, including in the run-up to the next staff survey to help encourage staff to complete the survey.
- The survey on the NICE website was sent to the non-executive directors, with committee chairs able to comment through other stakeholder surveys.
- The separate actions to update the strategic risks and publish the position statement on the UK’s withdrawal from the European Union (EU) were complete.

5 The Board briefly discussed the preparations for the UK’s withdrawal from the EU, noting NICE’s ongoing collaboration with the Department of Health (DH) and the Medicines and Healthcare products Regulatory Agency (MHRA) on this issue.

Chief Executive’s update (item 5)

6 Andrew Dillon updated the Board on a number of matters, summarised below.

   NICE and NHS business planning for 2018-19

7 The Senior Management Team are currently developing the business objectives for 2018-19 which will be brought to the Board in January. The Board and DH will have the opportunity to comment on the full draft business plan in the New Year, with final approval sought at the March Public Board meeting. The DH have confirmed that transition funding will be provided to cover the shortfall arising from the revised timescale for recovering the costs of the technology appraisal and highly specialised technologies programmes from industry.

8 Andrew highlighted the reference to NICE guidelines in a recent paper to the NHS England Board on NHS planning for 2018-19. This stated
that new NICE guidelines can only expect to be implemented locally across the NHS if in future they are accompanied by a clear and agreed affordability and workforce assessment at the time they are drawn up. Andrew briefly outlined the work planned in collaboration with NHS England on this matter, and this is an opportunity to raise the profile of NICE guidelines and promote the benefits to the NHS of their implementation.

**Digital developments**

9 Andrew noted that NICE’s Medtech early assessment tool won an award for digital innovation in the public sector at the recent Digital Entrepreneur Awards. He also noted that the British National Formulary (BNF) app that was developed by NICE five years ago to promote electronic access to the BNF will be stood down, following the launch of an app by the BNF’s publisher. He praised the staff involved in these digital innovations.

**Centre for Health Technology Evaluation**

10 Andrew provided an update on the proposals, previously reported to the Board, to establish a new commercial and managed access team in the Centre for Health Technology Evaluation (CHTE). A new Programme Director role will be established to oversee the team, which will lead NICE’s input to commercial discussions with NHS England and manufacturers of the products under review.

**Gender pay reporting**

11 Andrew briefed the Board on the information that will be published as part of a wider Government initiative. He noted that the mandated reporting does not indicate whether there is difference between the pay of males and females undertaking the same job. The agenda for change framework should guarantee that individuals undertaking the same role with the same experience are paid the same.

**Healthy work week**

12 Andrew noted this will take place 22 to 26 January 2018, and highlighted the planned activities.

**Strategic ambition and risk (item 6)**

13 Andrew Dillon presented the statement on NICE’s strategic ambition and the risks to these, in the period 2018 to 2021, which has been updated to reflect the discussions at the Board strategy away-day on 18 October 2017. Subject to any comments from the Board, the document will inform the risk register, and the annual objectives in the business plan.
The Board supported the document and agreed it should be brought to the Board annually, with more regular review by the Audit and Risk Committee.

**ACTION:** David Coombs

**Policy on declaring and managing interests for advisory committees (item 7)**

Gill Leng presented the amendments to the proposed policy in response to the feedback from the public consultation. The changes from the consultation draft seek to simplify the policy, and address concerns that the approach to managing interests could undermine NICE’s ability to recruit suitably qualified and experienced committee chairs and members. One of the main themes in the consultation feedback was the treatment of interests arising from private practice. In response, a more flexible approach is now proposed in the policy.

Mixed views were expressed on the revised policy, with several Board members concerned it remained too restrictive, in particular, the extent that previous research or other expressed views on the matter under consideration should lead to exclusion from at least part of the committee’s discussion on the grounds of a non-financial interest. On balance, there was support for revising the policy to provide greater opportunity for committee members in this position to contribute to the committee’s discussion. The committee chair should have discretion to balance the risk of perceived bias, with ensuring the committee have access to the committee member’s expertise.

Dr Peter Jackson, chair of the Highly Specialised Technologies Evaluation Committee, cited a hypothetical example of a committee member’s family member potentially benefitting from a treatment brought to the committee for evaluation. Dr Jackson suggested the policy is amended so this is declared as an interest. Andrew Dillon highlighted this issue had been extensively discussed in the past, arguing that it is unreasonably intrusive, particularly when it would require family members’ conditions to be declared. He noted that the NHS conflicts of interest policy does not require this information to be declared.

The meeting extensively discussed the principle of whether an individual should be excluded from a meeting if they have undertaken consultancy or advisory services for a company whose product was under review, or was the comparator for the product under review. Views were expressed that a “reasonable person” could perceive this to represent a conflict of interest. However, Mirella Marlow and Professor Andrew Stevens, chair of a technology appraisal committee, highlighted the operational impact of applying this approach to the advisory committees in CHTE. Given the consolidation in the life sciences industry from mergers, it could be challenging to identify members, particularly health economists, who
have not received any funding from the companies involved in the appraisal. They proposed that the interest should only be treated as specific when it relates to the product under review, or the comparator. The individual could participate if the income was unrelated to the products under review. Following discussion, there was support for adopting this approach, but with discretion for the committee chair to exclude a member if the consultancy income from the manufacturer of the product under review, or the comparator, accounts for a majority of the person’s income, even if this income is for work unrelated to the product under review. It was suggested this approach could meet the “reasonable person test” if the “reasonable person” takes account of the impact of the ability of the committee to operate and the level of company consolidation in the life sciences industry.

19 It was agreed that the policy should be amended to reflect the above changes in relation to non-financial interests, and defining an interest as specific when it relates to the product under review. The policy should also be reviewed to ensure the different approaches for standing and topic-specific guidelines committees are clear. The amended policy will be circulated to the Board for comment by email, and then finalised for submission to the January Public Board meeting.

ACTION: Gill Leng / David Coombs

20 Implementation of the new policy, which will apply across NICE, was briefly discussed, with the importance of sufficient training highlighted. It was agreed that committee recruitment should be undertaken under the existing policy until the new policy is agreed; however this recruitment should be mindful of the incoming new policy to ensure any appointments are consistent with the new provisions. Committee recruitment material will also need to clearly explain NICE’s policy to avoid misconceptions about the level of restrictions in place.

Replacement of the Director of the Centre for Guidelines (item 8)

21 Andrew Dillon presented the paper that informed the Board of Professor Mark Baker’s intention to step down from his role as Director of the Centre for Guidelines at the end of September 2018. Andrew paid tribute to Mark’s outstanding contribution to the NHS throughout his career, and outlined the proposed arrangements for appointing Mark’s replacement.

22 The Board supported the proposed approach, noting that a formal request to proceed to advertise the role, together with the role description will be brought to the Board. This will provide the opportunity to confirm the location for the role.

ACTION: Andrew Dillon
Any other business (item 9)

23 David Haslam noted that Professor Andrew Stevens retires from his role as chair of Technology Appraisal Committee C at the end of December 2017. On behalf of the Board, he and Andrew Dillon thanked Professor Stevens for his outstanding contribution to NICE over almost 20 years.

Date of the next meeting

24 The next Board strategy meeting will be on Wednesday 21 February 2018 in the Derwent room, NICE offices, London.