

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Senior Management Team

Minutes of the meeting held on 23 October 2018

Present

Andrew Dillon	Chief Executive
Ben Bennett	Director – Business Planning and Resources
Meindert Boysen	Director – Centre for Health Technology Evaluation
Jane Gizbert	Director – Communications
Gill Leng	Director – Health and Social Care

In attendance

Mark Campbell	Acting Programme Director – Centre for Health Technology Evaluation (item 7.4)
David Coombs	Associate Director – Corporate Office (minutes)
Martin Davison	Head of Management Accounts – Business Planning and Resources (item 7.3)
Fiona Glen	Programme Director – Centre for Guidelines
Johanna Hulme	Interim Programme Director – Health and Social Care Directorate (item 7.1)
Grace Marguerie	Associate Director – HR (item 7.2)
Danielle Mason	Senior External Communications Manager (item 7.5)
Mark Salmon	Programme Director and Deputy Evidence Resources Director

Apologies (item 1)

1. Apologies were received from Paul Chrisp and Alexia Tonnel who were represented by Fiona Glen and Mark Salmon respectively.

Freedom of Information and publication scheme (item 2)

2. The final minutes will be made available on the NICE website subject to the redaction of any exempt material.

Declarations of interest (item 3)

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

Notes of the previous meeting (item 4)

4. The minutes of the meeting held on 16 October 2018 were approved.

Matters arising (item 5)

5. The actions from the meeting held on 16 October 2018 were noted as complete or in hand.

Board meetings (item 6)

6. SMT discussed the next steps following the Board strategy away-day held on 17 October, noting that Gill Leng will now produce a paper for the November Public Board meeting to seek the Board's formal approval for the pilot.

ACTION: GL

7. SMT reviewed and agreed the agenda items for the Board meetings on 21 November and 12 December. SMT discussed the potential implications for NICE of the UK's withdrawal from the European Union, and agreed that a paper on this should be added to the agenda for the morning session in November, with a further update provisionally scheduled for the December meeting depending on the position with finalising the withdrawal agreement. It was agreed that the chair of the Interventional Procedures Advisory Committee should be asked to give the committee chair update at the December Board Strategy meeting.

ACTION: DC

NICE impact report – antimicrobial resistance and infectious diseases (item 7.1)

8. Johanna Hulme presented the report that, subject to any comments from SMT, will be presented to the November Public Board meeting. Johanna highlighted the proposed topics for future reports, and stated that as requested at the last Board meeting, the cover paper for this report will include information on the communications activities to disseminate the impact reports and the number of downloads on the NICE website.
9. SMT welcomed the report and agreed this for submission to the November Board meeting.

Workforce strategy (item 7.2)

10. Grace Marguerie presented the revised draft workforce strategy 2018 to 2021, which has been amended following SMT's review of an earlier draft in August.
11. SMT noted comments from the Board about the importance of developing NICE's staff, and the recent staff survey feedback which identified support for career development as an area for improvement. It was therefore agreed that the strategy should include a stronger statement on staff development, with a commitment to consider the scope for introducing structured management development programmes for bands 8 and 9. In addition, it was agreed that the text on NICE pathways should be refined. Andrew and Gill Leng would liaise with Grace to make these respective changes.

ACTION: AD/GL/GM

12. Subject to these and other minor amendments, including reformatting the paper to use the Board paper template, SMT approved the workforce strategy for submission to the November Board meeting.

ACTION: GM

Finance and resource report (item 7.3)

13. Ben Bennett presented the report that outlined the financial position at 20 September, and provided an update on current and potential future funding from NHS England. The report also included an update from the facilities team on health and safety incidents and other points of note.
14. Andrew Dillon highlighted the vacancy factor in the Centre for Health Technology Evaluation and to a lesser extent, the Evidence Resources Directorate, acknowledging the potential impact on staff and NICE's ability to deliver the business plan outputs. Meindert Boysen noted actions to manage the impact on

affected staff, including a flexible approach to scheduling activity and a recent recruitment drive, following which a number of posts are currently under offer. Meindert highlighted that several of the vacancies are for newly established posts, some of which are to deliver future anticipated increased activity in the technology appraisals programme. It was agreed that this explanatory information should be included in next month's report to the Board, given the Board's previous focus on this issue.

ACTION: MB/BB

15. SMT discussed the lower than expected income from Science Advice, with the Science Advice and Research programme now forecasting a £0.3m deficit at year-end. SMT welcomed that the incoming Science Advice Director will increase business development capacity, but noted potential strategic threats to Scientific Advice's income. It was noted this will be explored further as part of the business case and financial modelling for the NICE Foundation.
16. Andrew Dillon noted that the £0.5m capital allocation will very likely be underutilised in 2018/19. He noted the review of the use of the Manchester office and stated that planning for capital expenditure should take place at an early stage to ensure greater utilisation of next year's allocation.

ACTION: BB

17. Gill Leng suggested that NICE purchases interactive whiteboards, as these could be useful in the pathways pilot. Ben stated that this could be explored, although it may be classed as revenue expenditure.
18. SMT discussed engagement with NHS England in the business planning process, and supported NICE's sponsor team continuing to share NICE's draft business plan with NHS England. It was agreed that respective leads within NICE should continue to directly engage with the relevant contacts at NHS England to confirm NHS England's intentions around current and potential future commissions from NICE.
19. SMT welcomed the information in the report on health and safety incidents, and requested further information about the nature of the near miss.

ACTION: BB

20. SMT members agreed to remind their teams of the importance of 'checking in' to meeting rooms to ensure data on meeting room usage is accurate.

ACTION: SMT

Evidence for effectiveness standards for digital health technologies (item 7.4)

21. Mark Salmon and Mark Campbell presented the update on the Evidence for Effectiveness (EfE) project. The work has progressed well and it is proposed to publish the framework on the NICE website as a document developed by NICE in collaboration with other organisations.
22. SMT discussed the work undertaken to date, and the links to other system-wide initiatives. It was suggested that a graphic to explain the relationship between this project and other health organisations' activities on digital health technologies would be helpful. It was agreed that further discussions with NHS England should

take place regarding the long-term funding for maintaining the framework, and how the framework sits alongside other initiatives in this area, including the suggestion that NICE might have an expanded role evaluating digital health technologies, potentially through the technology appraisal programme.

ACTION: MC/MS

23. SMT noted the proposed publication timeline, including seeking SMT's approval in late November/early December to publish the framework.

NICE annual conference 2019 programme (item 7.5)

24. Danielle Mason presented the proposed programme for the annual conference, and asked for SMT's feedback on the overall theme, plenary topics, speakers and streams. Danielle outlined the proposed logistics arrangements that take account of the learning from the 2018 conference at the same venue.
25. SMT discussed the proposed networking event, and asked Danielle to explore costs for a larger event at a different venue to mark NICE's anniversary.

ACTION: DM

26. SMT reviewed the draft programme and made a number of amendments to the proposed sessions and speakers. It was agreed that the final plenary session should, if possible, end earlier than currently planned, and be reconfigured to include a presentation from Steve Pearson of the Institute for Clinical and Economic Review (ICER), and a look at NICE's plans for the future through the pathways programme. It was noted that it may be appropriate for NICE's next Chair to conclude the event, if the upcoming appointment process has concluded. It was agreed that Danielle would liaise with relevant SMT members to finalise the programme, and the updated programme did not require further collective review at an SMT meeting before it is launched.

ACTION: DM

27. Gill Leng highlighted that the 2019 World Healthcare conference is being held in Manchester and NICE has been asked to potentially lead a session. It was agreed that Gill and Danielle would discuss this further and consider next steps.

ACTION: GL/DM

Involvement of the Deputy Directors with SMT and the Board (item 7.6)

28. Andrew Dillon fed back from his meeting with five of the six Deputy Directors. The meeting had been convened to consider whether it would be helpful for the deputies to regularly meet, and also how to increase their exposure to the Board meetings in readiness for when they may need to step into the Director role temporarily or substantively.
29. Andrew stated that the group agreed to convene a regular informal meeting, to which SMT members may be asked to attend for specific issues. The group also asked to attend SMT meetings when papers they have authored are discussed, and also to have greater opportunity to attend Board Strategy meetings.
30. SMT discussed and supported these proposals. In relation to the Board meeting attendance, it was agreed that up to three deputies could attend any Board Strategy or morning session at the Public Board meetings given space limitations.

The deputies would be responsible for identifying who would attend any given meeting. Mark Salmon was asked to feed this back to his fellow Deputy Directors and also ask for the group's agreement to include the Science Advice and Research Programme Director in these arrangements.

ACTION: MS

Guideline committee chair appointment – cannabis based products for medicinal use (item 7.7)

31. SMT approved the appointment of Professor Stephen Pilling as chair of the guideline committee.

NICE pathways (item 8)

32. No further update.

Weekly staff SMT updates (item 9)

33. SMT agreed the staff updates.

ACTION: DC

Any other business (item 10)

34. Andrew Dillon stated that six staff members have expressed an interest in the Harkness Fellowship in Health Care Policy and Practice, and asked SMT to consider the process for selecting NICE's nominee. It was agreed that SMT members would individually vote for their preference for NICE's nominee. To facilitate this, David Coombs would circulate the brief supporting statements to SMT.

ACTION: DC/SMT