**National Institute for Health and CARE excellence**

Senior Management Team

# Minutes of the meeting held on 25 June 2019

**Present**

Gill Leng Deputy Chief Executive and Director – Health and Social Care

Ben Bennett Director – Business Planning and Resources

Paul Chrisp Director – Centre for Guidelines

Alexia Tonnel Director – Evidence Resources

**In attendance**

Moya Alcock Associate Director and Deputy Communications Director

David Coombs Associate Director – Corporate Office (minutes)

Leighton Coombs Senior Programme Analyst – Health and Social Care Directorate (item 7.3)

Mirella Marlow Programme Director and Deputy Centre for Health Technology Evaluation Director

Grace Marguerie Associate Director – Human Resources (items 7.2, 7.4 and 7.5)

Eric Power Programme Director – Health and Social Care (item 7.3)

Judith Richardson Programme Director – Health and Social Care (item 7.1)

## Apologies (item 1)

1. Apologies were received from Andrew Dillon, Meindert Boysen and Jane Gizbert, with the latter represented by Mirella Marlow and Moya Alcock respectively.

## Freedom of Information and publication scheme (item 2)

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

## Declarations of interest (item 3)

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

## Notes of the previous meeting (item 4)

1. The minutes of the meeting held on 18 June 2019 were agreed.

## Matters arising (item 5)

1. The actions from the meeting held on 18 June 2019 were noted as complete or in hand.

## Board meetings (item 6)

1. SMT noted the actions from the Board meetings on 19 June 2019.
2. SMT discussed the suggestion at the Board Strategy meeting on 19 June to amend the policy on declaring and managing interests for advisory committees to give more flexibility to appoint members who are likely to be excluded from more than 50% of the committee’s discussions. Having considered the matter further, SMT agreed that the current wording in the policy was appropriate, and that Paul Chrisp would follow up with an explanation about the current flexibility.

ACTION: PC

1. The agenda items for the Board meetings on 17 July 2019 were agreed. It was confirmed that the paper to the morning session on the abdominal aortic aneurysm guideline did not require further SMT review given it will be based on the paper previously submitted to SMT.
2. Gill Leng asked that the evaluation form sent to the public attendees at the Board meeting seeks feedback on the new approach to the question time session.

ACTION: MA/DC

## Revalidation annual report (item 7.1)

1. Judith Richardson presented the annual report on revalidation, which subject to any comments from SMT, will be presented to the July public Board meeting. The report confirms that the statutory requirements for medical revalidation have been met, and provides an update on revalidation for other registered health and care professionals.
2. Gill Leng highlighted the recently published Department of Health and Social Care (DHSC) template for the annual revalidation reports. Judith stated that given this was only released on 18 June, the revalidation committee agreed to maintain NICE’s own format for the 2018/19 report, and then adopt the DHSC template for the 2019/20 report. As the template only contains information on medical revalidation, NICE will need to consider how to include information on revalidation for other health and care professionals in the report.
3. SMT approved the 2018/19 report for submission to the July Board meeting.

## Impact report: social care (item 7.3)

1. Eric Power and Leighton Coombs presented the impact report covering adult social care for submission to the July Board meeting and publication on the NICE website. The report has been developed in consultation with the NICE social care forum and includes data from NHS Benchmarking, plus more qualitative information than usual.
2. SMT welcomed the report and approved this for submission to the Board, subject to adding a heading on page 8 to increase the prominence of the information on the CQC report based on the NICE guideline on improving oral health for adults in care homes.

ACTION: EP/LC

1. SMT discussed the proposal for future NICE impact reports to be HTML webpages, developed by the corporate communications team, rather than standalone pdf documents. SMT noted the rationale for this proposal, in that it will ensure the reports meet accessibility requirements, and the content can be more easily shared and promoted. Plus, there is no identified budget to continue with the externally designed reports. However, SMT also agreed there is a need to be able to produce printed copies for review at Board meetings by both Board members and public attendees. In addition, other users of the report may welcome the option to download and print the reports. SMT therefore supported the proposal to produce future reports in HTML format providing there is an ability to download and print these. The cover paper for the social care report in July should explain this revised approach for future reports and include a link to the HTML version of the social care report.

ACTION: MA/EP

## Annual workforce report (item 7.2)

1. Grace Marguerie presented the annual workforce report, which subject to any comments from SMT, will be presented to the July public Board meeting. Grace noted the increase in voluntary turnover from the previous year, and stated this will be kept under review.
2. SMT reviewed each section of the report and agreed a series of amendments, including to:

* Amend the summary to provide brief commentary on the implications of the highlighted data, and to also include the gender pay data.
* Clarify whether the turnover data includes staff changing roles within NICE.
* Add comparative information on the gender pay gap.
* Review the reporting categories for the equalities data, including providing the number of respondents who stated “other” for gender if this data is held, and if it is not available, explain why.
* Update the text on employee relations activity to reflect the latest position with the employment tribunals.
* Amend the section on training to clarify the position with mandatory training, and remove the breakdown of external training by centre/directorate, which it was agreed did not add value in its current form.

1. SMT reviewed the data on the equalities profile of people applying for roles at NICE compared with those who were appointed, and noted the lower conversion rate for male applicants and applicants of non-white ethnicity. In relation to gender, it was agreed that staff should be reminded of SMT’s decision in 2018 that recruitment panels should normally be mixed gender, and this noted in the report. SMT noted that the lower conversion rate for non-white applicants has been a long-standing issue and is also seen in the wider NHS sector. Grace stated that once recruitment is brought in house and NICE has its own applicant tracking system, it may be possible to review the data in more detail, including excluding candidates who did not meet the most basic requirements for the role, such as the required qualification, from the data. In the meantime, the anonymised nature of the shortlisting process helps provide assurance on the non-discriminatory nature of the process.
2. Subject to these, and other drafting and presentational changes, the report was agreed for submission to the Board.

ACTION: GM

1. SMT agreed that it would be helpful for future reports to include information on the take-up of carer’s leave, purchased annual leave, and other types of leave. Grace noted that she hoped improvements in data capture would also enable future reports to include more information on staff moving between roles within NICE.

ACTION: GM

## Staff survey results (item 7.4)

1. Grace Marguerie presented the draft report on the staff survey results. She noted that the proportion of respondents who positively rated NICE as a place to work was 94%, and although this reduced 1% from last year it remains very high.
2. SMT reviewed the report, the heatmaps showing variation by centre/directorate, and the free text comments. SMT confirmed the importance of the action plan addressing the areas shown ‘red’ and ‘grey’, in particular the feedback around stress and working hours. SMT discussed the feedback about bullying and harassment and considered whether further actions could be taken in this area. It was noted that the recently appointed Freedom to Speak Up Guardians could help address employee concerns about raising issues, and that staff may not be aware of the outcome of investigations into allegations due to the need for confidentiality. It was agreed that Directors and their HR support would pick up any required actions in this area, as well as any other local issues in the feedback, as part of the centre/directorate action plans.

ACTION: SMT/GM

1. Alexia Tonnel highlighted the comments from the Evidence Resources Directorate about the unpleasant smell in the Manchester office and stated that she has also regularly experienced this in the area between MR6 and MR9. It was agreed that Ben Bennett would look into this issue.

ACTION: BB

1. SMT agreed that the staff survey results, excluding the heatmaps and free text comments, should be shared with the Unison Executive, Health and Wellbeing group, Health and Safety group and colleagues in the Communications and Facilities team for input into a staff action plan. The September Board meeting would then receive the results, action plan and an expanded summary of the themes in the free text comments. It was agreed to wait until after the September Board meeting before sharing the results with staff, as this would enable the results to be circulated alongside the action plan agreed by the Board.

ACTION: GM

## Clinical excellence awards scheme (item 7.5)

1. Grace Marguerie presented the proposed arrangements for the 2019 round of the local clinical excellence awards (CEA) scheme.
2. SMT approved the arrangements for the awards, as set out in the policy and covering paper.
3. In response to a query from Mirella Marlow, Gill Leng confirmed that only doctors employed by NICE are eligible for the local awards. Any standing committee chairs who are doctors would need to apply to their host employer.

## Guideline committee chair appointment (item 7.6)

1. Paul Chrisp presented the proposal to appoint Dr Aung Soe to the position of chair of the NICE guideline committee on management of gout. Dr Thomas is a consultant paediatrician, and none of his declared interests are specific to the guideline.
2. SMT approved Dr Soe’s appointment as chair of the guideline committee.

## EU exit (item 8)

1. No further update.

## NICE Connect project (item 9)

1. Gill Leng noted that the second lunch and learn session on NICE Connect was very well attended. The feedback to date has highlighted the need to be able to demonstrate tangible outcomes from the initial transformation activities in order to sustain staff enthusiasm for the five year change programme.

## Weekly staff SMT updates (item 10)

1. SMT agreed the staff updates.

ACTION: DC

## Any other business (item 11)

1. Paul Chrisp asked whether SMT still wished to approve the appointment of guideline committee chairs or would consider an alternative approach. It was agreed Paul would discuss this with Andrew Dillon.

ACTION: PC/AD