**National Institute for Health and Care Excellence**

Executive Team

# Minutes of the meeting held on 25 January 2022

## Present

Gill Leng Chief Executive

Paul Chrisp Director, Centre for Guidelines

Jane Gizbert Director, Communications

Felix Greaves Director, Science, Evidence and Analytics

Jennifer Howells Director, Finance, Strategy and Transformation (up to item 7.2)

Judith Richardson Acting Director, Health and Social Care

Alexia Tonnel Director, Digital, Information and Technology

## In attendance

Gail Allsopp Interim Chief Medical Officer (up to item 7.2)

Jeanette Kusel Director, Scientific Advice

Grace Marguerie Associate Director, HR

Jonathan Waghorne Chief of Staff

David Coombs Associate Director, Corporate Office (items 5.1, 5.2 and 6.1)

Mark Salmon Programme Director, Evidence Services (item 6.2)

Martin Davison Associate Director, Finance (item 7.1)

Lisa Hooley Senior OD, Learning and Talent Manager (item 7.2)

Lorna Scoular Senior HR Business Partner (item 7.2)

Elaine Repton Corporate governance and risk manager (minutes)

## Apologies (item 1)

1. Apologies for absence were received from Meindert Boysen and Nicole Gee who were represented by Jeanette Kusel and Grace Marguerie.

## Declarations of interest (item 2)

1. The previously declared interests were noted. Gail Allsopp’s interests were to be added to the ET register.

**ACTION: ER**

## Notes of the previous meeting (item 3.1)

1. The minutes of the meeting held on 18 January 2022 were agreed as a correct record.

## Matters arising (item 3.2)

1. The actions from the meeting held on 18 January 2022 were noted as complete or in hand.
2. ET noted that the DHSC had declined the request for extra time to submit the budget template to allow a discussion with the new CEO, therefore the deadline of 28 January will be met.
3. Grace Marguerie confirmed that discussions had taken place with finance colleagues on the business case for a leadership management and development programme, and a further version was expected to be shared with Jennifer Howells later today for review, and subsequently with Gill Leng.
4. ET’s comments on the draft business plan have been incorporated into the next iteration which will be shared with Sam Roberts next week.

## Hot topics (item 4.1)

**Technology Appraisal (Palforzia)** – ET discussed the resource impact report for Palforzia, for treating peanut allergy in children, which has been assessed on the basis of treating 3,000 children however, the anticipated demand was expected to be much higher, and therefore have a bigger impact for NHSE. Jennifer Howells agreed to speak to Elaine Cartwright to request an amendment to the RIA report to state that this is an initial cost assessment based on 1,000 patients and with capacity to treat 3,000. The TA is due to publish on 2 February and whilst ET did not want to further delay the much awaited TA, it was agreed that the narrative may need to be reviewed before publication. Paul Chrisp agreed to ask Eric Power to speak to the Medicines Associates to ask what they think the expected take up will be, and to contact NHS England if necessary. Gill Leng requested feedback from the various stakeholders by 27 January.

**ACTION: JH/PC**

1. **Returning to the office** – Grace Marguerie advised that the facilities team had updated the home working guidance on NICE Space since the recent lifting of restrictions and sought ET’s agreement to remove the individual COVID risk self-assessment tool, in line with other ALBs. There was a debate as to whether the risk assessment should be removed as it was still applicable to any staff who were clinically vulnerable. In light of the risk assessment being voluntary, it was agreed to remove it on the basis that the decision and rationale is clearly communicated to staff, and specific advice given to anyone who considers themself to be clinically vulnerable. Grace was asked to raise the decision at the next H&S committee and to work with the communications team on the messaging to staff. It was also noted that the NICE C-19 operating levels document will be reviewed at the next Operational Management Committee (OMC) meeting.

**ACTION: GM**

## Board meetings (item 5)

## January board actions (item 5.1)

ET reviewed the actions from the January private and public board meetings. It was noted that a discussion on returning to the office at the February board seminar may be too early for Sam Roberts to have formed an opinion, but she could be asked to share her initial thoughts.

Paul Chrisp asked that action 21/38 – update on changes to the operating model for guidelines - remain open with an amended completion date of June 2022.

**ACTION: DC**

## February board meeting (item 5.2)

ET discussed the draft agenda for the February board strategy meeting. Helen Knight will be providing TA metrics for the CEO update. The content of the OD and People update was queried. Grace Marguerie advised it will be high level updates on key activities. Nicole Gee and Sam Roberts will receive the slides for approval in advance.

It was agreed that it would be helpful for the Field Team Associate Directors to each make a short presentation of the issues within their areas and to join the board members over lunch as there is now limited interaction since board meetings aren’t peripatetic. This will also be helpful for Sam Roberts’ introductions. David Coombs agreed to share the proposed revised arrangements with the chairman for approval.

**ACTION: DC**

The March public board agenda was also reviewed. It was agreed to bring the ‘societal perspectives’ paper to ET for discussion before agreeing whether it should be in the private or public session. It was also agreed to move the health inequalities item to the morning session to allow a more open debate. Judith Richardson would consider including slides in the CEO’s update report in February.

**ACTION: JR**

## Items for decision (item 6)

## Policy approval mechanism (item 6.1)

1. ET was asked to agree a mechanism for approving corporate polices following the establishment of the OMC. It was agreed to maintain the existing principle, whereby approval from the relevant director is sufficient for non-material changes to existing policies. The OMC will now be responsible for reviewing and approving new policies and material changes to existing policies, subject to some exceptions noted in the paper. ET and the board will continue to approve the risk management and declarations of interest policies and the overarching health and safety policy. Additionally, the OMC, IGSG and H&S committee may escalate policy changes to ET if there were matters materially impacting staff terms and conditions.
2. ET supported the proposal that some policies were better reviewed at specialist forums where there is an ET member as chair of the group or in attendance. This included the health and safety committee approving health and safety policies and the Information Governance Steering Group approving information governance and records management policies. Any people related policies will also be shared with the Joint Consultative Committee for comment before being submitted to the OMC.
3. It was noted that the corporate office will maintain a full list of policies stating the review date, ET lead and approving group/committee. ET emphasised the importance of clearly communicating any policy changes to staff and ensuring messages are cascaded from senior managers to their teams. David Coombs advised that any changes approved at ET or OMC are communicated in the Your Week at NICE briefings. Additionally, the policy development guidance is in the process of being reviewed and David agreed to ensure the next iteration provides clarity on responsibility for communicating and implementing policy changes.

**ACTION: DC**

## NICE and Health Education England: proposed update to the MoU 2022-25 (item 6.2)

1. Mark Salmon sought ET’s support for a proposed new Memorandum of Understanding for 2022-25. The paper set out the services that NICE currently provides to the NHS and health and social care organisations in England on behalf of Health Education England and reflected the changing relationship between NICE and HEE in the provision of those services and contracts, and in light of the merger of HEE into NHS England during 2022/23.
2. ET discussed the impact of the changes on the provision of current NICE services and contracts, in particular the impact on the evidence resources team and the budget implications from 1 April 2022. Jennifer Howells requested a further discussion of the financial impact of decommissioning services to understand how the resources are being re-invested, and also how the funding which NICE will be losing, is going to be covered. Grace Marguerie also requested a discussion to understand the impact on staff. Mark Salmon was asked if there was a case to request additional funding from HEE to support NICE taking on the contract management responsibility for three new national subscriptions. Mark agreed to explore this further with HEE.

**ACTION: MS/JH/GM**

1. In summary ET supported the development of the new MoU subject to clarifying the financial and staffing implications and having a plan to look at future engagement and relationship management with HEE.

## Strategic items (item 7)

## DHSC finance return (item 7.1)

1. Jennifer Howells confirmed that NICE had received the 2022-23 business planning commission from DHSC on 21 January and requested ET’s input to support completion of the template by the return deadline of 28 January. Martin Davison joined the meeting to present the scenarios and options for consideration taking account of the requested funding cuts of 5% admin and 10% programme budgets. ET discussed in detail the list of bids and pressures and considered where further efficiency savings could be achieved, as well as potential opportunities for income generation and commercial partnering. Jennifer Howells was asked to update a draft return for sharing with Gill Leng ahead of the deadline.

**ACTION: JH**

1. Directors were requested to feedback to Martin with their views on the baseline savings options and additional bids identified through the budget setting discussions which have been RAG rated based on must do (legal/regulatory), recognised as important or discretionary. Feedback was requested as early as possible.

**ACTION: All**

(Jennifer Howells and Gail Allsopp left the meeting at this item)

## Skills mapping – NICE workforce of the future (item 7.2)

1. Lisa Hooley gave a progress update on the skills mapping work. She requested Directors’ key feedback on their areas, in response to Deloitte’s skills assessment report in early January. Directors provided high level comments for summarising into a short slide presentation to update the board at the February strategy meeting.
2. ET asked Lisa to reflect the work that is already underway to address some of the skills gaps identified as progress has been made which was not evident in Deloitte’s report. It was agreed to highlight the most important areas as there was expected to be limited funding next year to invest in training and additional new roles.

**ACTION: LH**

## Guideline development centres (item 7.3)

1. Paul Chrisp provided an update on progress with the collaborating centres transfer. There was positive news in that new laptops have been delivered and additional data storage has been procured, thereby mitigating two key risks.
2. The notes from the first consultation meetings last week are ready to be circulated to the transferring staff. The budget position was still being worked through.

## Review of the meeting (item 8)

The meeting overran due to lengthy discussions on some items however, ET welcomed the shorter papers.

## Other business (item 9)

**Gill Leng, Chief Executive** – This was Gill’s last ET meeting before leaving NICE on 31 January. Gill thanked ET colleagues and all the other staff who regularly attended the ET meetings for their support over many years.