**National Institute for Health and Care Excellence**

Executive Team

# Minutes of the meeting held on 1 March 2022

## Present

Sam Roberts Chief Executive

Paul Chrisp Director, Centre for Guidelines

Nicole Gee Interim Chief People Officer

Jane Gizbert Director, Communications

Felix Greaves Director, Science, Evidence and Analytics

Jennifer Howells Director, Finance, Strategy and Transformation

Judith Richardson Acting Director, Health and Social Care

Alexia Tonnel Director, Digital, Information and Technology

## In attendance

Gail Allsopp Interim Chief Medical Officer

Jeanette Kusel Director, Scientific Advice

Jonathan Waghorne Chief of Staff

Lorna Scoular Senior OD, Learning and Talent Manager (item 5.1)

Sarah Woodhead Apprenticeships and Training Coordinator (item 5.1)

Lisa Hooley Senior OD, Learning and Talent Manager (item 5.2)

Nicky Tyson OD and EDI Consultant (item 5.2)

Suzie Panek Payroll Manager (item 5.2)

Kendall Jamieson Gilmore Associate Director, Strategy (items 5.3 and 6.1)

David Coombs Associate Director, Corporate Office (items 5.4 and 6.1)

Hilary Baker Programme Director, Transformation (item 6.1)

Elaine Repton Corporate governance and risk manager (minutes)

## Apologies (item 1)

1. Apologies for absence were received from Meindert Boysen who was represented by Jeanette Kusel.

## Declarations of interest (item 2)

1. The previously declared interests were noted. There were no new interests.

## Notes of the previous meeting (item 3.1)

1. The minutes of the meetings held on 15 and 22 February 2022 were agreed as a correct record.

## Matters arising (item 3.2)

1. The actions from the meetings held on 15 and 22 February 2022 were noted as complete or in hand. The following matters arising were discussed:
2. **Return to the office** - It was confirmed that an updated FAQ on returning to the office had now been circulated. Based on feedback to the HR team, Nicole Gee emphasised the need for dialogue with staff about when it is appropriate to be in the office for collaboration with colleagues, rather that managers mandating a number of days per week. It was agreed that it should be left to directors in discussion with their teams to agree what was reasonable.
3. **ME/CFS guideline** - Gail Allsopp advised that there was still significant discussion with NHSE and stakeholders regarding the ME/CFS guideline. She confirmed she was currently working with Heather Stephens to draft an implementation statement for GRIP, as agreed at the roundtable in November 2021. It was agreed that Gail Allsopp would share the draft statement with Jane Gizbert, Paul Chrisp and Sam Roberts for approval before it is circulated externally for comment.

**ACTION: GA**

1. **Culture update** - Nicole Gee highlighted the need for ET to have a further discussion on culture ahead of the April board meeting. It was agreed to ask Clare Langan to find a suitable date for ET to meet with the external consultants to discuss a culture ‘blueprint’ for NICE.

**ACTION: NG**

1. **Expenses** - Jennifer Howells advised that NICE’s subsistence rates were linked to HMRC scale rates for subsistence.  To increase them would result in significant additional administrative burden, as well as a liability for PAYE and NIC for both staff and NICE.  It was unlikely that other public sector bodies exceeded scale rates and as such benchmarking would add little value.  Hotel limits would however be reviewed, being mindful of Managing Public Money principles.

**ACTION: JH**

1. **Secondment opportunities** - Nicole Gee requested a short job description from Directors to provide to the ABPI. Directors with a substantive vacancy were asked to provide details to Nicole. ET acknowledged the potential for stakeholders to question NICE’s independence if it were to employ staff from the life sciences and/or pharma industry. Jeanette Kusel added that involvement in the TA programme and having access to NICE’s commercial data could not be supported. ET noted that a consultancy role advising NICE could be an option. Jane Gizbert and Gail Allsopp were asked to review the job description to balance the risks of external expert support and maintaining NICE’s independence.

**ACTION: NG/JG/GA**

## Hot topics (item 4.1)

**Equality, diversity and inclusion style guide** – Nicole Gee provided feedback from the NICE Equality and Diversity Group meeting regarding the EDI style guide. The group has requested that consideration be given to changing the language in NICE guidance to extend gender references to also include trans and non-binary. Paul Chrisp and Nicole Gee were asked to discuss the request further and report back their views to a future ET meeting.

**ACTION: PC/NG**

## Items for decision (item 5)

## Conference attendance (item 5.1)

ET considered proposed criteria, an annual budget allocation and process map for agreeing staff attendance at national and international conferences, both virtually and in person. The proposals were approved subject to a comprehensive comms plan being developed and consideration being given to teams who may wish to self-fund attendance. Jeanette Kusel and Lorna Scoular agreed to discuss self-funding separately. Judith Richardson also agreed to send details of a quality and safety in health care conference (to be held in Gothenburg) to Sarah Woodhead to add to the list.

**ACTION: LS/JK/JR**

## Gender pay reporting 2020/21 (item 5.2)

ET reviewed the gender pay gap annual report for 2020/21 noting that NICE’s mean pay gap was 7.59% compared with the national average 15.4%. The position had improved compared to last year (which was 9.26%), however ET expressed concern about the percentage of black, Asian and minority ethnic females who were disproportionately in the lowest pay bands and queried whether enough was being done. Nicky Tyson confirmed there were a range of actions in the EDI action plan to address barriers to BAME job applicants, in addition to those outlined in this paper.

ET also discussed the plans to launch a Female Leadership Network to coincide with International Women’s Day and emphasised the importance of proactively encouraging black, Asian and minority ethnic females to join NICE. It was agreed that Sam Roberts would be the ET sponsor for the NICE Female Leadership Network, and there will be communications going out to promote the activities and talks planned for International Women’s Day on 8 March 2022.

## National Clinical Audit and Patient Outcomes Programme (item 5.3)

Kendall Jamieson Gilmore provided an update on the forthcoming tender for the National Clinical Audit and Patient Outcomes Programme (NCAPOP) and sought ET’s view on whether NICE should consider submitting a bid. There was a detailed debate about the advantages, disadvantages and risks of NICE taking on the NCAPOP contract. It was concluded that more information was needed on the exact terms of the contract, what NHSE’s future vision was for NCAs, whether a partnering option would be viable and what the financial and resourcing requirements would be if NICE was to submit a bid and be successful.

Felix Greaves agreed to undertake further work to provide clarity on the questions raised and come back to ET at a future meeting. The item was deferred from the March Board agenda.

**ACTION: FG**

## Integrated performance report (item 5.4)

The integrated performance report was reviewed ahead of its presentation to the March public board meeting. Directors were asked to confirm the summary narrative against their own objectives. Alexia Tonnel suggested amendments to the Digital Workplace progress update given the delays at the start of the year due to procurement and recruitment issues. ET agreed to remove the final column of table one.

**ACTION: AT/JH**

Given previous challenges from the board regarding budget underspends, Directors were asked to be prepared for a question about planning to avoid underspends next year.

## Strategic items (item 6)

## Prioritisation of business plan and strategic priorities for 2022/23 (item 6.1)

1. ET received a presentation of the proposed strategic priorities for 2022/23 and was asked to confirm the exact wording of the four objectives, and also to confirm the directorate objectives which will require support from other directorates, and the activities which will not be progressed.
2. The four priority objectives were agreed, subject to Paul Chrisp working with Kendall Jamieson Gilmore to amend the wording of living guideline objective to describe more specifically what will be delivered, and also to involve Judith Richardson for a narrative on what is meant by ‘implementation’ of the guidance within the pathway.

**ACTION: PC/JR/KJG**

1. Jonathan Waghorne outlined the staff engagement plan, beginning with an all staff email and feedback survey, followed by options to attend a face to face or virtual workshop, in addition to Sam Roberts attending senior team meetings and a discussion at the Senior Leader’s Forum. Summary slides will be included in the CEO’s update report to the March board meeting.

**ACTION: JW**

1. For the ET meeting next week, it was agreed to discuss the financial scenarios and agreeing an approach for teams to confirm they have sufficient funding for priorities and business as usual work.

## Health inequalities (item 6.2)

1. This item was deferred until next week.

## Guideline development centres (item 6.3)

1. An update on the transfer was deferred until next week.

## Return to the office feedback (item 7)

1. This item was deferred until next week.

## Operational management committee (item 8)

1. This item was not discussed.

## Review of the meeting (item 9)

This item was not discussed.

## Other business (item 10)

There were no further items of business.