**National Institute for Health and Care Excellence**

Executive Team

# Minutes of the meeting held on 18 October 2022

## Present

Sam Roberts Chief Executive (chair)

Mark Chapman Interim Director, Medical Technologies and Digital Evaluation

Paul Chrisp Director, Centre for Guidelines

Jane Gizbert Director, Communications

Felix Greaves Director, Science, Evidence and Analytics

Helen Knight Acting Interim Director, Medicines Evaluation (item 7.1 only)

Boryana Stambolova Director, Finance, Corporate and Commercial

Alexia Tonnel Director, Digital, Information and Technology

## In attendance

Jenniffer Prescott Programme Director, HTA Process and Operations

Victoria Thomas Head of Public Involvement Programme

David Coombs Associate Director, Corporate Office (item 4)

Elena Doyle Associate Director, Data Management and Information (item 5)

Fiona Glen Programme Director, Centre for Guidelines (items 6, 7.1 & 7.2)

Sarah Boyce Senior Technical Analyst, C-19 Team, CfG (item 7.1)

Kate Kelley Associate Director, Guideline updates, CfG (item 7.1)

Emma McFarlane Technical Advisor, C-19 Team, CfG (item 7.2)

Steve Sharp Technical Advisor, C-19 Team, CfG (item 7.2)

Elaine Cartwright Associate Director, Resource Impact Analysis (item 8)

Cheryl Pace Implementation Manager, Health & Social Care (item 8)

Tara Chernick Health Technology Adoption Manager (shadowing cohort)

Elaine Repton Corporate Governance and Risk Manager (minutes)

## Apologies (item 1)

1. Apologies for absence were received from Jennifer Howells and Judith Richardson, who was represented by Victoria Thomas. Jenniffer Prescott represented Helen Knight who attended for item 7.1 only.

## Declarations of interest (item 2)

1. The previously declared interests were noted. Boryana Stambolova has been added to the register.
2. Fiona Glen declared that she is the NICE representative on the GIN board with reference to item 6 on the agenda.

## Notes of the previous meetings (item 3.1)

1. The minutes of the meeting held on 4 October 2022 were agreed as a correct record subject to the following amendment:

**Minute 19 UK Pharmascan** last sentence amended to read: The options included doing nothing, DIT undertaking a short-term fix, DIT undertaking a complete re-build, a re-build which is outsourced but managed by NICE, and a complete re-build which outsourced to another organisation.

**Review of the actions (item 3.2)**

1. The actions from the meeting on 4 October 2022 were reviewed and the following matters arising were discussed:
2. **Minute 7** – Eileen Platt has agreed to start including anonymised exit interview data in the monthly HR update to ET. Eileen is to speak to Sam Roberts to confirm whether this will come to an informal ET meeting or be circulated via email for information.
3. **Minute 8** – The DOI policies will be included as a topic at a future all staff meeting, probably in January, once the revised whistleblowing policy has been approved.
4. **Minute 17** – The monthly EDI sessions at ET have now been re-organised so that one of the staff network chairs will attend in rotation and the meetings will be themed.
5. **Minute 23** – Details of the new business case approval process have been communicated and published on NICE Space along with a blog from John Pegington. Teams were encouraged to speak to their finance business partners if they need any support.

**CEO update**

1. Sam Roberts briefly updated ET on current issues, including:
* The MTA of therapeutics for COVID-19 will be taking place today. Helen Knight will be leaving ET to attend the committee meeting.
* The Secretary of State has written to NICE about the timescale for the technology appraisal of Evusheld. Helen Knight and Jenniffer Prescott were asked to respond to the letter by the close of business today.

**October board strategy away day (item 4)**

1. ET discussed the agenda and format for the day, the external speakers and the anticipated outcomes to support NICE’s strategic ambitions and transformation journey.

**Master data management business case (item 5)**

1. ET approved a business case for procuring a Master Data Management (MDM) tool and consultancy support, as a first step in building NICE’s data management capabilities. The option to introduce just MDM in the first instance and consider introducing CRM as phase 2 (subject to funding), was supported. The budget request in 2022/23 was from the underspend to pay for the first-year licences, initial work to configure the software, and work on data integration and training. It was proposed to start the work from 1 November 2022. Boryana Stambolova requested that the Commercial Team be engaged before the procurement starts. The proposal was welcomed by ET members who said the work will support all the guidance producing teams and PIP.
2. Alexia Tonnel agreed to provide ET with a summary slide showing how the MDM project relates to the digital workplace programme. Boryana Stambolova was also asked to bring the schedule of finance business cases to ET next month, including the start dates for projects.

**ACTION: AT & BS**

## GIN conference and CADTH/ICER visit (item 6)

1. Fiona Glen gave a summary from the GIN conference and the CADTH/ICER visit. ET noted the conference focus was on equity, but the key discussion topic was living guidelines. Sam Roberts highlighted the learnings from the event for NICE. It was agreed to make contact with the WHO as they are applying living guidelines to their whole topic suite, to see what can be learnt from them. Also, to think about more international collaboration, and how this can be achieved.

## COVID-19 Guidelines (item 7)

# COVID-19 Integrating the forthcoming MTA into the living guideline (item 7.1)

1. Helen Knight presented options for integrating the MTA of therapeutics for people with COVID-19 into the COVID-19 living guideline, taking into consideration the disestablishment of the COVID-19 team from March 2023, the issue of cost recovery if frequent updates to the MTA will be required, and the lack of data.
2. ET discussed the issue of data collection, noting that the most rapid signal of effectiveness of nMABs against new variants will come from in vitro data, but queried whether this would be sufficient. Additionally, there will be a resource requirement from the Centre for Guidelines to provide ongoing surveillance.
3. It was agreed to progress option 1a involving the guideline development team taking the responsibility for maintaining and updating the MTA reviews and recommendations, plus exploring work with ScHARR. Fiona Glen was asked to come back to ET in the next 2 to 3 weeks with a recommendation for next steps in maintaining the MTA articulating the resource and approach that would be required

**ACTION: FGl/HK/JP/BS**

# COVID-19 Moving out of living guideline mode (item 7.2)

1. Fiona Glen referred to the COVID-19 team being funded until 31 March 2023 after which the staff will be re-deployed into other teams within CfG. ET was asked to agree that the COVID-19 guidelines NG188, NG191 & NG200 are retired from the current living approach by 31 March 2023, and to consider next steps for their short and long term maintenance, and how the change out of living mode should best be communicated to system partners. ET expressed concerns that the messaging to the system should not indicate a backwards step away from NICE being agile. Fiona and Jane Gizbert were asked to agree the comms.

**ACTION: FGl & JG**

1. A decision on retiring the COVID-19 guidelines from the living approach was deferred and Fiona Glen was asked to discuss next steps with the group to be set up, as mentioned in minute 17 above, involving staff from the COVID-19 team to maintain their expertise and skills and to input their views and key learning from producing living recommendations.

**ACTION: FGl**

# Guideline Resource and Implementation Panel review (item 8)

1. ET was asked to consider the future role of the Guideline Resource and Implementation Panel (GRIP) as the current process does not fit in with NICE’s strategic aim to embed implementation upstream in guideline development. Following a review, it has been recognised that the Panel are not the right people to be engaging with, at the right point of contact for the topics. Furthermore, the GRIP statements are not implementation support tools, nor are they widely utilised.
2. It was recommended therefore that GRIP be replaced by engagement with the system which is tailored to the topic being discussed, with stakeholders who are experts in the topic area, and held earlier in the guideline development process. This engagement will be led by the RIA team or the implementation team, who will take responsibility for highlighting their priority topics to the system. Existing engagement activities undertaken by the CMO and the CEO will continue be utilised and provide support.
3. ET agreed with the proposal to stand down GRIP but requested that the existing panel members be consulted on how they want to be involved in the future, and also to speak with the Medicines Implementation and Field Teams to have an agreed way forward to ensure implementation feeds into guidance more effectively, and to come back to ET with a plan when the discussions have concluded.

**ACTION: CP & EC**

## Operational Management Committee (item 9)

1. The minutes and actions from the meeting held on 12 October 2022 were noted.

## Other business (item 10)

No further items raised.