

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Senior Management Team

Minutes of the meeting held on 19 December 2017

Present

Andrew Dillon	Chief Executive
Mark Baker	Director – Centre for Guidelines
Ben Bennett	Director – Business Planning and Resources
Jane Gizbert	Director – Communications
Gill Leng	Director – Health and Social Care (items 1 to 6.2)
Carole Longson	Director – Centre for Health Technology Evaluation

In attendance

David Coombs	Associate Director – Corporate Office (minutes)
Paul Chrisp	Programme Director and Deputy Health and Social Care Director (items 6.3 onwards)
Carla Deakin	Associate Director – Office for Market Access – Centre for Health Technology Evaluation (item 6.5)
Elaine Repton	Governance Manager: information (item 6.1)
Mark Salmon	Programme Director and Deputy Evidence Resources Director
Jane Silvester	Associate Director – Social Care and Leadership – Health and Social Care (item 6.6)

Apologies (item 1)

1. Apologies were received from Alexia Tonnel who was represented by Mark Salmon. Gill Leng left partway through the meeting and was represented by Paul Chrisp for the remainder of the meeting.

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.

Notes of the previous meeting (item 3)

3. The minutes of the meeting held on 12 December 2017 were approved subject to a minor correction to paragraph 6.

Matters arising (item 4)

4. The actions from the meeting held on 12 December were noted as complete or in hand.

Board meetings (item 5)

5. The actions from the Board Strategy meeting on 13 December 2017 were noted as in hand.
6. The agenda items for the Board meetings on 17 January were agreed.

Risk register (item 6.1)

7. Elaine Repton presented the updated risk register, which had been amended to reflect the discussion at last week's SMT meeting.
8. SMT agreed no further changes were required prior to presentation of the high and medium risks to the January Audit and Risk Committee. It was agreed that the rating and mitigations for the risk on web-based collaborating tools will be reviewed after the SMT discussion on this issue.

Potential collaboration with Medicaid (item 6.2)

9. Gill Leng presented the paper that outlined a proposal from Medicaid in New York state for potential future collaboration with NICE. Gill noted that Medicaid would like to build on NICE's expertise of assessing value for money, and quality improvement and integration across health and social care.
10. SMT discussed the principle of the collaboration and supported exploring this further at the proposed meeting with Medicaid in the new year. It was agreed that it would be helpful to clarify the relationship between the federal and state Medicaid programmes and the level of autonomy for state Medicaid programmes in commissioning health and social care services. Legal advice should also be sought on the liabilities arising from NICE providing advice to the Medicaid programme.

ACTION: GL

11. It was agreed that high level options should be developed for the meeting in the new year, but it would be appropriate to recover the costs from Medicaid for any further work beyond this. Gill Leng will keep SMT updated on this work.

ACTION: GL

Policy on declaring and managing interests for advisory committees (item 6.3)

12. SMT reviewed the amendments to the draft policy following the discussion at the Board Strategy meeting on 13 December. It was noted that the requested changes had been made to adopt a product rather than company based approach to defining an interest as specific, and also to provide greater flexibility for a committee member to contribute to a discussion on a topic on which they had previously expressed a view. SMT agreed the policy for circulation to the Board members for comment, prior to presentation for approval at the January Public Board meeting.

ACTION: DC / GL

13. SMT discussed implementation of the new policy. It was agreed the new policy should be used for committee recruitment immediately following Board approval. The remainder of the policy, i.e. the provisions relating to the declaration, handling and publication of interests, could then be implemented from April 2018. SMT supported the proposal from the Centre of Guidelines to exempt the guidelines due to be submitted to NICE for consultation before the end of August 2018 from the new policy. This is because the work to develop these guidelines will have largely completed by April 2018, and applying the policy to these guidelines could delay the guidance and would not be a proportionate use of public funds if additional meetings are required. This proposed approach to implementation should be clearly outlined in the paper to the Board in January, together with the titles of the

20 guidelines subject to the proposed exemption, to provide transparency over the approach taken.

ACTION: DC / MB

14. Andrew Dillon asked Mark Baker to review the declarations of interest from the 20 affected guideline committees to identify whether any of the declared interests would have required exclusion from the committee discussions under the provisions of the new policy. This information could be included in the Board paper as appropriate.

ACTION: MB / AD

NICE uptake and impact reporting: cancer (item 6.4)

15. Paul Chriss presented the proposed uptake and impact report to the January Board meeting. This is the first of the new format, which will be produced for each public Board meeting. Paul noted that the commentary from the National Clinical Director is awaited.
16. SMT welcomed the report and the accessible format for presenting the information on NICE's impact. It was agreed that the report should be titled "NICE impact", and the costs of the six reports each year should be met from the existing medicines and technologies programme budget.
17. SMT agreed the report for submission to the January Board, subject to several minor amendments, including updating the data relating to the Cancer Drugs Fund, referencing the close working with NHS England, and clarifying that not all of NICE's cancer guidance is included in the report. It was agreed that each impact report should include a generic statement on the expected impact of NICE's guidance, together with tailored text on the expected impact of guidance in the selected topic area.

ACTION: PC

Accelerated Access Review progress update (item 6.5)

18. Carla Deakin presented the update on the progress and status of NICE activities to support the Accelerated Access Review (AAR).
19. SMT discussed the report and noted the work undertaken to date. A number of issues require further development, including the process for getting technologies to transformative designation, case managing the acceleration of these products through a bespoke acceleration plan, and the process for evaluating whether the products are clinically and cost effective. The expectations around the cost neutrality of the selected basket of products also require clarification. Carole Longson proposed that the first meeting of the AAC shadow board considers the draft methods and processes for the accelerated access pathway, and a document outlining NICE's role in supporting the AAC.
20. It was agreed that Andrew Dillon would seek a meeting with the chair of the Accelerated Access Collaborative (AAC) to discuss the expectations on NICE in hosting the AAC programme office. NICE should also write to the AAC chair, copying in the OLS and Minister, setting out the actions required to operationalise the AAC from April 2018. Andrew asked Carole and Carla to draft this letter.

ACTION: AD / CL / CD

21. SMT briefly discussed the development of a web presence for the AAC. Andrew Dillon confirmed that a page would be developed on the NICE website. A full microsite could not be developed within the available funding or timeline.
22. It was agreed that the report should be reduced in length and revised as appropriate for the January Public Board meeting.

ACTION: CL / CD

Social care work programme (item 6.6)

23. Jane Silvester presented the proposed report to the January Board meeting on NICE's social care work programme. Jane outlined several points of note in the report, including award of the contract to produce further 'quick guides' to the Social Care Institute for Excellence (SCIE).

24. SMT agreed the report for submission to the January Public Board meeting.

Business planning (item 7)

25. SMT reviewed the draft objectives for 2018-19, with amendments from Alexia Tonnel prior to the meeting. It was agreed to include a further business objective under the operating efficiently section, relating to establishing NICE Scientific Advice as a business unit. Carole Longson would provide the appropriate text.

ACTION: CL

26. Subject to these amendments, the objectives will be reviewed at the morning session of the January Board meeting, together with a summary of the financial plan. The full draft business plan will then be discussed at the February Board Strategy meeting.

ACTION: BB / DC

Weekly staff SMT updates (item 8)

27. SMT agreed the staff updates.

ACTION: DC

Any other business (item 9)

28. Ben Bennett informed SMT that six further workstations in the London office will be sub-let to the Human Fertilisation and Embryology Authority (HFEA). He is also considering a request from NHS England to access six workstations.