

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Senior Management Team

Minutes of the meeting held on 21 November 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 (part of meeting)
Carole Longson	Director – Centre for Health Technology Evaluation
Alexia Tonnel	Director – Evidence Resources

In attendance

David Coombs	Associate Director – Corporate Office (minutes)
Catherine Wilkinson	Associate Director – Finance and Estates (item 6.1)

Apologies (item 1)

1. None.

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 14 November 2017 were approved.

Matters arising (item 4)

4. The actions from the meeting held on 14 November were noted as complete or in hand.

Board meetings (item 5)

5. SMT noted the actions from the November Public Board meeting. It was agreed that the update on the establishment of the Accelerated Access Collaborative should be broadened to a wider progress update on the Accelerated Access Review.
6. The agenda items for the December Board Strategy meeting and January Public Board meeting were agreed.

Accommodation planning (item 6.1)

7. Catherine Wilkinson presented the paper that outlined a number of developments relating to the London and Manchester office accommodation, and asked SMT to consider a series of points about the future estates requirements.

Policy on declaring and managing interests for advisory committees (item 6.2)

8. David Coombs presented the amendments to the proposed new policy on declaring and managing interests for advisory committees, following the recent public consultation. One of the main changes is around the handling of private practice. In addition to the amendments throughout the policy, SMT is asked to consider the approach taken towards hospitality and personal experience of the health condition under review, and also whether to revise the provisions for the reference panel.
9. SMT noted the statement in the new policy that an individual living with a health condition relevant to the matter under review, or has a family member in that position, does not need to declare this as an interest, which reflects NICE's existing practice. SMT considered whether to maintain this position, or instead require committee members to make such declaration. Andrew Dillon stated that he felt such declaration was intrusive, and not proportionate to the perceived risk of bias arising from any such experience. It was also noted that lay members are often specifically recruited for their personal experience of the health condition under review, and this experience is not seen as a conflict of interest. It was agreed to maintain the current text in the policy, but flag this for the Board's review.
10. SMT considered the level of funding from the commercial sector to attend meetings, events and conferences that should be declared as a direct financial interest. It was agreed to amend the policy to state that direct payment from the commercial sector to attend a meeting, conference or event, over and above funding to support reasonable travel, accommodation and attendance costs should be declared. In case of doubt the NICE travel and subsistence policy is a guide for assessing what is 'reasonable'.
11. It was agreed the Audit and Risk Committee chair should chair the conflicts of interest reference panel, subject to their agreement.
12. SMT considered whether to revise the statement in the policy that a committee member should not be appointed if their interests are likely to require exclusion from more than 50% of the committee's discussions. On balance, it was agreed to maintain this provision, noting the flexibility within the provision and the available actions to mitigate interests prior to appointment, including transferring shares to a blind trust. Appointing members who were likely to miss more than half of the committee's meetings would likely create challenges for the committee's quoracy.
13. Carole Longson referred to the example in appendix E regarding consultancy fees received by an economist member of a technology appraisal committee. The policy proposes treating an interest as specific when funding has been received from the company producing the product under consideration. This could present operational challenges, given the extent of consultancy undertaken by the economist members. The current approach is to only treat an interest as specific if the funding relates to consultancy on the product under review. It was agreed that this issue should be flagged for the Board's consideration. To support this, Carole agreed to provide information on the implications of the proposed policy.

ACTION: CL

14. SMT noted the amendments around private practice, which would allow a member with relevant private practice to participate if their clinical experience is considered vital to the discussion. It was agreed to add a caveat to clarify that such participation should be when this expertise cannot be accessed by other means.

15. Subject to the above amendments, the policy was agreed for submission to the December Board Strategy meeting, with the identified matters highlighted for the Board's discussion.

ACTION: GL / DC

16. SMT discussed the timescale for implementing the policy, noting the challenges arising from the implementation of the current policy. Andrew Dillon asked the affected Directors to identify the operational impact of implementing the policy from April 2018 for new and existing committees, to inform the Board's discussion in December.

ACTION: MB/CL/GL/JG/AT

Any other business (item 9)

17. Mark Baker stated that the asthma guideline diagnosis and monitoring will shortly be published following agreement of supporting communications with NHS England. Andrew Dillon asked to see the proposed publicity prior to issue.

ACTION: MB

Gill Leng left the meeting

Update of CG53: Chronic fatigue syndrome/myalgic encephalomyelitis (item 6.3)

18. Mark Baker presented the proposed actions to manage the update of CG53, to increase the likelihood of stakeholder satisfaction.
19. SMT agreed to add to the recruitment panel for the committee chair an additional member independent from NICE and stakeholders for the guideline, to help ensure the chair is able to take an objective view on the evidence and ensure lay member input. Stakeholders would be welcome to promote the opportunity for the chair role to candidates they felt suitable and eligible under NICE's conflicts of interest policy, but there would be no opportunity for stakeholder groups to review submitted applications.
20. It was agreed to increase the number of lay members on the committee in recognition of the nature of the evidence base for the guideline. In addition to the chair, the committee will comprise 13 members in total, four of which will be lay members.
21. SMT agreed the proposal to hold a workshop prior to drafting the initial draft scope, following which the usual scoping process will apply. SMT also agreed the proposed meeting with stakeholder representatives during the development of the draft guideline. This will likely be held after the committee's fourth meeting and outline the approach the committee is taking. This information should also simultaneously be published on the NICE website. The meeting would not provide the opportunity to comment on the recommendations, which will be subject to the usual consultation.
22. SMT agreed to adopt the terminology myalgic encephalomyelitis/chronic fatigue syndrome for the guideline.

ACTION: MB

Digital services update (item 6.4)

23. Item deferred to next week's meeting.

Value frameworks and assessment methods (item 6.5)

24. Item deferred to next week's meeting.

Business planning (item 7)

25. No further updates.

Weekly staff SMT updates (item 8)

26. SMT agreed the staff updates.

ACTION: DC

FINAL