Appointment of Chair and Clinical Lead to Perioperative care Guideline Committee

Supporting information for applicants

Closing date for applications: Monday 10 July 2017 at 5pm
## Contents

Appointment of Chair and Clinical Lead to Perioperative care Guideline Committee . 1  
Supporting information for applicants ................................................................. 1  
Contents .................................................................................................................. 2  
Introduction ............................................................................................................. 3  
Role of committee members .................................................................................. 3  
About the post ......................................................................................................... 5  
Remuneration .......................................................................................................... 5  
  Chair (and Clinical Leads if appointed) ............................................................... 5  
  Locum costs ......................................................................................................... 6  
Time commitment ................................................................................................... 6  
Period of appointment ............................................................................................ 6  
  Topic-specific committee ..................................................................................... 6  
Diversity and equality of opportunity .................................................................. 7  
Equality monitoring ............................................................................................... 7  
  Why we need this information ........................................................................... 7  
  How we use the information ............................................................................. 8  
How to apply ............................................................................................................ 8  
Selection process .................................................................................................... 9  
Timetable ................................................................................................................ 9  
Additional information ........................................................................................... 10  
Conflict of interests ............................................................................................... 11  
How we manage your personal information ........................................................ 11  
Useful links ............................................................................................................. 12  
How to complain .................................................................................................... 12  
Appendix A: Role description and person specification ....................................... 13  
Appendix B: The Committee on Standards in Public Life: the seven principles of  
  public life ............................................................................................................. 19  
Appendix C: Standards of business conduct for NICE committee members ........ 20
Introduction
Thank you for your interest in the roles of Chair on the Perioperative care Guideline Committee.

NICE aims to improve outcomes for people using the NHS and other public health and social care services. We do this by:

- **producing** evidence-based guidance and advice for health, public health and social care practitioners
- **developing** quality standards and performance metrics for providers and commissioners of health, public health and social care services
- **providing** information services for commissioners, practitioners and managers across health and social care.

Role of committee members
Members may be NHS staff, healthcare professionals, local government staff, social care practitioners, patients, service users and carers, and professionals from the academic world. They are expected to use their personal experience and judgement for the topics considered by the committee and to actively contribute to improving the quality and consistency of care provided by the NHS.

Committee members are appointed to a committee because of their relevant experience or their specific technical skills. Committee members are not appointed to act as representatives of a particular organisation. If members belong to stakeholder organisations, NICE and the committee assume that they bring this perspective to the group, and are not representing their organisation.

Committee members are co-authors of the guidance. They should respect the rights of NICE both to:

- publish the final guidance and associated products (for example, products to support implementation), and
- receive notification of any proposed publications related to their work on the guideline.

Committee members agree to:
• set aside enough time to attend committee meetings and use their personal and professional knowledge to inform the development of the guidance
• raise any concerns about process or details in the draft guidance with the committee, and try to resolve these issues within the committee, with support from the guidance developer or the NICE guidance project team
• contribute positively to the work of the committee and to developing the guidance
• take full account of the evidence in developing recommendations
• consider the analysis and interpretation of evidence prepared by the evidence review team
• act in a professional manner, show good manners and be courteous to colleagues and staff at all times (committee members should behave in a polite, efficient and respectful manner and without bias or favour, using the highest standards of conduct expected in public life and service while on NICE duty)
• be impartial and honest in conducting their duties for NICE, use public funds entrusted to them to the best advantage of NICE, and avoid deliberately damaging the confidence of the public or stakeholders in NICE
• ensure strict adherence to NICE’s social value judgements and equality policy
• read and adhere to NICE’s policies on hospitality, declarations of interests and travel and subsistence.

Role of the Chair

The Chair ensures that the Committee takes full account of the evidence in developing recommendations and considers the analysis and interpretation of the evidence prepared by the evidence review team. The Chair must therefore establish trust and mutual respect among members of the committee and give opportunities for all members to contribute to its discussions and activities.

While all committee members must ensure appropriate consideration of the implications of guidance for equality, this is a particular responsibility for the chair.

The chair should also offer committee members feedback and comment on their contribution to the committee, on an annual basis, for revalidation purposes or personal development.
The Chairs of advisory committees are in a special position in relation to the work of their committee and so may not have any specific financial or non-financial personal, non-personal or family interests. This includes a published statement expressing a clear opinion about the matter under consideration, which could reasonably be interpreted as prejudicial to an objective interpretation of the evidence.

**About the post**

NICE is seeking to appoint a Chair for its Perioperative care Guideline Committee (GC). Depending on the expertise and the declarations of interest of applicants (which may preclude appointment as chair of the committee¹), we may wish to appoint a Clinical Lead as well as a Chair from applications received to provide support to the National Guideline Centre (NGC) (the Developer) in the update of this guideline.

The Chair (and Clinical Lead if appointed) will be working in collaboration with the staff of the National Guideline Centre (NGC) and members of the guideline committee (GC) over a period of approximately 30 months to produce a clinical guideline on perioperative care on behalf of the National Institute for Health and Care Excellence (NICE).

The Chair will be supported by a Clinical Lead (if appointed) and by the permanent staff of the NGC who are responsible for the overall project management, organisation of GC meetings, carrying out evidence reviews and economic analysis.

The role description and person specification are given in appendix A.

**Remuneration**

*Chair (and Clinical Leads if appointed)*

The Chair (and Clinical Lead if appointed) will be reimbursed for reasonable expenses, including rail fares and hotel costs when necessary, that are incurred through attending guideline committee and other guideline meetings. A copy of the NICE reimbursement policy is available on request.

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¹ The NICE Policy on Conflicts of Interest states that the chairs of advisory committees are in a special position in relation to the work of their committee and so may not have any specific financial or non-financial personal, non-personal or family interests.
The Chair (and Clinical Lead if appointed) may claim £250 per committee meeting (inclusive of preparation work and pre-committee meetings) in addition to expenses.

**Locum costs**
If members are NHS contractors whose practice has to employ a locum to allow their attendance at NICE meetings, then locum costs will be reimbursed to the practice. If the practice arranges internal locum cover by a profit-sharing partner, this will be reimbursed at a maximum of £350 a day or £175 for a half-day. If an external locum agency or salaried staff/partner is used, the cost of the locum will be reimbursed up to a maximum of £500 a day or £250 for a half-day.

Self-employed locums will be reimbursed £350 a day or £175 for a half-day.

Locums from community pharmacies/practices that are commercial organisations (such as Specsavers, Boots and Lloyds Pharmacy) are **not** entitled to claim for locum costs. This also applies to hospital-based locums.

**Other expenses**
The cost of child care will be paid only when it is shown that no reasonable alternative arrangements can be made.

Please refer to NICE’s [travel and subsistence policy](#).

**Time commitment**
Time commitment will include up to a full-day pre-GC meeting, and a full-day GC meeting, every 6-8 weeks for approximately 16 months during the development phase. There will be additional work before development to scope the guideline, and also after development, during consultation, validation, publication and post-publication phases.

**Period of appointment**

**Topic-specific committee**
Chairs and members of topic-specific committees will be appointed for the development of a specific guideline.
Diversity and equality of opportunity
Appointment is governed by the principles of public appointment based on merit. Candidates may come from a wide range of backgrounds and experience, and each successful candidate will need to demonstrate that they meet all the essential criteria for the post. NICE encourages applications from groups currently under-represented on our committees.

We will consider reasonable adjustments to our recruitment processes to ensure that those applicants who possess the skills and experiences required for a role are not put at a substantial disadvantage because of a disability.

Equality monitoring
We recognise that you may be wary about giving us personal information, and be concerned about how we use it and how well we protect it. You may also feel that some of the questions on the monitoring form are intrusive.

Why we need this information
NICE’s guidance and other quality improvement products aim to help the NHS and the health and social care community and other planners and practitioners to give all sections of their communities an equal opportunity to benefit from health and social care services. More evidence on how interventions affect particular groups would help us to do this better. But we also believe it’s important that our advisory bodies reflect the diversity of the population. Not only is it right in principle, but it also means that they can draw on a broader range of knowledge, experience and insight, and so produce better guidance.

We encourage people with the right qualifications from all parts of the population to join advisory bodies. This is why we want you to answer all the questions in the monitoring form.

NICE is legally required to avoid unlawful discrimination and to consider how to advance equality. Monitoring the impact of our recruitment policies is essential to meet these duties.
How we use the information
We use the information you give us only for monitoring the diversity of applicants and appointees to our committees. We will not use it in the selection process, and our interview panel will not see it. We detach this information from the application form so that you can’t be identified. A separate department in NICE analyses the information and reports on whether the information indicates our processes could be unfairly impacting on certain groups.

It is important for us to collect this information and we very much hope you will want to complete this form.

How to apply
The following documents must be submitted for your application:

- applicant information form
- short CV
- cover letter explaining how you meet the criteria in the person specification and your motivation for applying for the post (maximum 2 pages); your full name and the specific role for which you are applying must be clearly noted at the top of your letter.
- completed declarations of interests form
- equality monitoring form.

Applications must be sent to NGC-projectcoordinators@rcplondon.ac.uk or by post to:

NGC Administrator
Royal College of Physicians
11 St Andrews Place
London
NW1 4LE

Applications must be received by 5pm on Monday 10 July 2017. Applications received after this date will not be considered.

Your application will be acknowledged by email (or another way, if requested).
Selection process

All appointments are made on merit according to NICE’s Recruitment and Selection to Advisory Bodies Policy and Procedure. This policy observes the Code of Practice of the Office of the Commissioner for Public Appointments, which monitors appointments to public bodies and ensures that all appointments are made on merit after fair and open competition.

After the closing date for applications:

- A panel will assess candidates’ CVs and supporting letters to decide who best meet the criteria for the role and who will be invited to interview. The panel will rely only on the information you give in your application to assess whether you have the skills and experience required. Please ensure that you provide evidence to support how you meet all the essential criteria.
- We anticipate that by mid-July the panel will have decided who will be invited for interview.
- The panel will choose only the strongest applicants who it feels have demonstrated that they best meet the criteria in the person specification.
- If invited to interview, the panel will ask you about your skills and experience, asking specific questions to assess how you meet the criteria for the role.
- If your application is successful, you will receive a letter/email from the recruiting team to confirm the terms on which an appointment is offered.
- The recruiting team will notify you if you are unsuccessful.

Timetable

Chair interviews are scheduled to take place on **Tuesday 22 August 2017 (PM)**. Applicants must be available to attend an interview on this date.

The Chair (and Clinical Lead, if appointed) must also be available to attend the following meetings as part of the scoping phase:

- Scoping meeting 1: Thursday 21 September 2017 (PM)
- Scoping workshop and Scoping meeting 2: Thursday 19 October 2017
- Scoping meeting 3: Thursday 21 December 2017 (PM)
Additional information

Please note that anyone who meets 1 or more of the categories below will be automatically disqualified from membership of any NICE committee:

- a doctor who is under investigation\textsuperscript{2} by the General Medical Council, and who has had interim restrictions placed on their practice, or who has been removed from the Medical Register
- other professionals who are under investigation for professional misconduct, or have been found to be in breach of appropriate professional standards by the relevant professional body
- anyone who has received a prison sentence or suspended sentence of 3 months or more in the last 5 years.

Anyone who meets any of the categories below will not be automatically disqualified, but they may be asked to step down from membership of a NICE committee, at the sole discretion of NICE. Therefore, please tell us in your application should any of these points apply:

- a doctor who is under investigation by the GMC but has not been subject to any interim restrictions
- people who are the subject of a bankruptcy restrictions order or interim order
- anyone who has been dismissed (except by redundancy) by any NHS body
- those who have had an earlier term of appointment terminated
- anyone who is under a disqualification order under the Company Directors Disqualification Act 1986
- anyone who has been removed from trusteeship of a charity.

Any committee members or chairs who are appointed because of their up to date professional healthcare knowledge and experience should have an active registration with the appropriate professional body when they are appointed and when their appointment is renewed. For medical committee members or chairs, this includes a licence to practise.

\textsuperscript{2} GMC ‘Investigation’ is defined as an investigation into whether the practitioner’s fitness to practice is impaired by reason of one or more of the heads of impairment set out in section 35c(2) of the Medical Act 1983
Conflict of interests

NICE is expected to achieve and maintain high standards of fairness in the way we conduct our business. These standards include impartiality, objectivity and integrity, and effective handling of public funds. Managing potential conflicts of interests is an important part of this process.

Managing conflicts of interests effectively is an essential element in developing the guidance and advice that NICE publishes. Without this, professionals and the public will lose confidence in our work.

We give particular consideration to interests involving payment or financial inducement or any reputational interest related to academia that may be affected by the matters under discussion.

The Chairs of advisory committees are in a special position in relation to the work of their committee and so may not have any specific financial or nonfinancial personal, non-personal or family interests. Further information is available in the Policy on Conflicts of Interest.

Standards in public life and code of conduct

Committee members are expected at all times to act in good faith and observe the highest standards of impartiality, integrity and objectivity in conducting the committee’s business (see appendix B). Members will be required to sign to accept the terms of appointment relating to conduct (appendix C).

How we manage your personal information

Your personal data will be held by NICE in accordance with the Data Protection Act 1998 only for the purpose of recruitment to the advisory committees. It will not be given to third parties. Anonymised statistical information, including equalities data, may be held in order to monitor our recruitment process.

When we ask you for personal information, we promise we will:

• only ask for what we need, and not collect too much or irrelevant information
• ensure you know why we need it
• protect it and as far as possible, make sure that nobody has access to it who shouldn't
• ensure you know that you have a choice about giving us information
• make sure we don’t keep it longer than necessary
• only use your information for the purposes that you have authorised.

We ask that you:

• give us accurate information
• inform us as soon as possible of any changes, or if you notice mistakes in the information we hold about you.

Useful links

About NICE

NICE Annual Reports

Social Value Judgement

NICE Equality Scheme

Policy on conflicts of interests

Information about the recruiting centre

How to complain
If you have a complaint about our recruitment process you may submit this to:

David Coombs
Associate Director, Corporate Office
National Institute for Health and Care Excellence
10 Spring Gardens
London
SW1A 2BU
david.coombs@nice.org.uk
Appendix A: Role description and person specification

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

<table>
<thead>
<tr>
<th>Role</th>
<th>Chair of the Perioperative care Guideline Committee</th>
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<tbody>
<tr>
<td>Centre</td>
<td>National Guideline Centre (NGC)</td>
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ROLE DESCRIPTION

<table>
<thead>
<tr>
<th>Summary</th>
<th>To work in collaboration with the staff of the National Guideline Centre (NGC) and members of the guideline committee (GC) over a period of approximately 30 months to produce a clinical guideline on Perioperative care on behalf of the National Institute for Health and Care Excellence (NICE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsibilities</td>
<td>The Chair will be supported by the permanent staff of the NGC who are responsible for the overall project management, organisation of GC meetings, carrying out evidence reviews and economic analysis. A Clinical Lead may also be appointed to provide support to the Chair.</td>
</tr>
</tbody>
</table>

**General**
- Attend all 13 GC meetings. These will take place in central London every 6-8 weeks over a period of approximately 16 months.
- Participate in NICE guideline committee training.
- Represent the GC at other meetings (such as those organised by NICE and relevant Medical Royal Colleges) if required.
- Ensure deadlines and timetables are met in conjunction with the Project Manager and NGC guideline lead.
- Be a champion for the guideline after publication and undertake activities to promote its implementation, such as talking at press and professional conferences and publishing guideline-related articles in accordance with the NGC publications policy.

**Guideline set-up**
- Participate in the selection (by telephone interview) of GC members with the guideline lead.
- Agree the detailed work plan for the guideline development project.
- Advise on the composition and membership of the GC.
- Work with the NGC staff and external stakeholders to develop the scope of the guideline.
Chairing GC meetings

- Attend pre-GC meetings, usually held two weeks before the main GC meeting to help prepare for the meeting.
- Help prepare the agenda and plan the GC meetings with NGC staff.
- Establish rules for GC functioning in accordance with the principles of the NICE Code of Conduct (copy available on request), and chair GC meetings accordingly.
- Ask for Declarations of Interests from members at each meeting, identify any conflicts and handle these as they arise in line with NICE’s policy (copy available on request).
- Ensure that the committee meetings achieve their aims by keeping to the agenda.
- Facilitate discussion at GC meetings about guideline development and writing of recommendations, within the agreed scope.
- Involve all GC members in discussion and decisions and encourage all members to express their views.
- Assist in resolving concerns or disagreements between GC members.
- Sign-off all minutes once approved by the GC.

Developing recommendations and drafting the guidelines

- Work with the GC, Clinical Lead (where appointed) and the NGC staff as required between meetings to identify key issues, formulate clinical questions for review, review evidence tables, identify priorities for economic analysis, advise on appropriate assumptions and data sources for economic models, and draft recommendations.
- Work with the Clinical Lead (where appointed) and NGC staff on writing and editing drafts of the guideline and take responsibility with the NGC guideline lead for approving the drafts of the guideline.
- Advise on responding to stakeholder comments on the draft guideline.
- Check the draft clinical audit criteria and implementation tools as required.

Conditions

- The GC Chair will be reimbursed for reasonable expenses incurred through attending GC and other guideline meetings. A copy of the NICE reimbursement policy is available on request.
- Time commitment will include up to a full-day pre-GC meeting, and a full-day GC meeting, every 6-8 weeks for approximately 16 months during the development phase. There will be additional work before development to scope the guideline, and also after development, during consultation, validation, publication and post-publication phases.
- The Chair may claim up to £250 per day at each GC meeting to
cover preparation and attendance at the meeting.

**PERSON SPECIFICATION**

<table>
<thead>
<tr>
<th>Extent and nature of committee experience</th>
<th>Essential</th>
<th>Desirable</th>
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<tbody>
<tr>
<td></td>
<td>• An understanding of the social, political, economic and professional influences on NICE.</td>
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<td>• Experience of expert committee work in a relevant setting.</td>
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<td></td>
<td>• Experience of working with patient/carer representatives.</td>
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<td></td>
<td>• Experience of developing evidence-based guidelines.</td>
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<tr>
<th>Ability to contribute to the work of the advisory body</th>
<th>Essential</th>
<th>Desirable</th>
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<tr>
<td>• Experience in health or social care (as appropriate), either as:</td>
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<tr>
<td>- a practicing health or social care professional, or</td>
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<tr>
<td>- working in or in association with the wider aspects of health or social care or the healthcare industries.</td>
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<tr>
<td>• Ability to take an impartial and balanced view during discussions of complex and emotive subjects</td>
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<tr>
<td>• Excellent group management, leadership and facilitation skills.</td>
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<td>• Excellent verbal and written communication skills.</td>
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<td>• A commitment to work within the framework of NICE processes.</td>
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<tr>
<th>Ability to understand and interpret multiple complex data sets</th>
<th>Essential</th>
<th>Desirable</th>
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<tbody>
<tr>
<td>• An understanding of critical appraisal of research evidence.</td>
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<tr>
<td>• Ability to effectively communicate complex ideas and concepts to mixed audiences.</td>
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<tr>
<td>• Understanding of systematic review methodology.</td>
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<tr>
<td>• Understanding of health informatics and indicator development.</td>
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<th>Nature of the motivation underpinning the application</th>
<th>Essential</th>
<th>Desirable</th>
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<tbody>
<tr>
<td>• Clearly and persuasively stated reasoning for making an application.</td>
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<tr>
<td>• No conflicts of interest (financial or non-financial, personal, non-personal or family interests).</td>
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</table>
Please see NICE Policy on Conflicts of Interest for details.

Equality and diversity
- Commitment to eliminating unlawful discrimination, advancing equality and an understanding or awareness of the issues of inequality in health, public health and social care settings.

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

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<thead>
<tr>
<th>Role</th>
<th>Clinical Lead of the Perioperative care Guideline Committee</th>
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<tbody>
<tr>
<td>Centre</td>
<td>National Guideline Centre (NGC)</td>
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</table>

ROLE DESCRIPTION

Summary
To work in collaboration with the Director and staff of the National Guideline Centre (NGC), the guideline Chair and the Guideline Committee (GC) over a period of 30 months to develop a clinical guideline on perioperative care on behalf of the National Institute for Health and Care Excellence (NICE). The Clinical Lead will be supported by the staff of the NGC who will be responsible for overall project management, organising GC meetings, carrying out evidence reviews and economic analysis.

Responsibilities

General
- Act in accordance with the principles of the NICE Code of Conduct.
- Participate in NICE guideline committee training.
- Have regular and frequent contact with the NGC project manager throughout the lifetime of the guideline for planning purposes and be able to answer queries at short notice.
- Attend all 13 GC meetings. These will take place in central London every 6-8 weeks over a period of approximately 16 months.
- To deputise for the guideline Chair when necessary.
- Represent the guideline committee at other meetings if required.
- Contribute to the development of other related guideline products.

Guideline set-up
• Advise on the composition and membership of the guideline committee.
• Work with the NGC staff and external stakeholders to develop the scope of the guideline.

**Guideline development**
• Participate in discussion and decision making.
• Provide expert knowledge on perioperative care and act as a source of clinical advice to the guideline Chair and NGC staff in the identification and review of evidence.
• Work with the GC and NGC staff to identify key issues, formulate clinical questions, review evidence tables, identify priorities for economic analysis, advise on appropriate assumptions and data sources for economic models and draft recommendations.
• Write and quality assure drafts of the guideline, along with the NGC Director and guideline Chair.
• Provide appropriate clinical advice to NGC staff when responding to stakeholder comments on the draft guideline, along with the guideline Chair.

**Conditions**
• Travel and subsistence will be met as per the NGC policy on travel and subsistence.
• Where overnight accommodation is required, this must be agreed with the NGC in advance of the meeting.
• The clinical lead may claim up to £250 per day at each GC meeting to cover preparation and attendance at the meeting.

**PERSON SPECIFICATION**

<table>
<thead>
<tr>
<th>Extent and nature of committee experience</th>
<th>Essential</th>
<th>Desirable</th>
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<tbody>
<tr>
<td>• Practicing senior healthcare professional with demonstrable relevant experience and clinical knowledge in the field of perioperative care</td>
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<td>• All applicants must be in current regular clinical practice for the entire duration of guideline development</td>
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<td>• Links with relevant professional bodies</td>
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<td>• Credible level of experience of expert committee work in a relevant setting</td>
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<tr>
<td>• Experience of working with patient/carer representatives</td>
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<td></td>
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<tr>
<td>• Experience of guideline development processes, with an understanding of systematic reviews, critical appraisal methods and the role of health economics</td>
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</tbody>
</table>
| Ability to contribute to the work of the advisory body | • Experience in health or social care (as appropriate) care either as a practicing health or social care professional or working in or in association with the wider aspects of health or social care or the health care industries, or through engagement in or with health or social care as a patient, member of the public, user, carer or as an advocate.  
  
• Ability to take an impartial and balanced view during discussions of complex and emotive subjects.  
  
• Excellent verbal and written communication skills.  
  
• A commitment to work within the framework of NICE processes.  
  
• A detailed knowledge of the NHS and its functions.  
  
• Understanding of the key issues in perioperative care and how these fit into the wider context.  
  
• An understanding of the social, political, economic and professional influences on NICE. |
| --- | --- |
| Ability to understand and interpret multiple complex data sets | • An understanding of critical appraisal of research evidence.  
  
• Ability to effectively communicate complex ideas and concepts to mixed audiences.  
  
• Understanding of systematic review methodology.  
  
• Understanding of health informatics and indicator development. |
| Nature of the motivation underpinning the application | • Clearly and persuasively stated reasoning for making an application.  
  
• Willingness to abide by the [NICE Policy on Conflicts of Interest](#). |
Appendix B: The Committee on Standards in Public Life: the seven principles of public life

**Selflessness**
Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other benefits for themselves, their family or their friends.

**Integrity**
Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might seek to influence them in the performance of their official duties.

**Objectivity**
In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.

**Accountability**
Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

**Openness**
Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

**Honesty**
Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

**Leadership**
Holders of public office should promote and support these principles by leadership and example.
Appendix C: Standards of business conduct for NICE committee members

1. Committee members are required to abide by NICE business standards in order to serve on NICE guidance committees. Standards include conforming to the Nolan Principles set out in the NICE Code of Business Conduct and declaring any interests in accordance with the NICE code of practice for declaring and dealing with conflicts of interest.

2. The 7 Nolan Principles for the conduct of public life that must be adhered to are:
   - selflessness
   - integrity
   - objectivity
   - accountability
   - openness
   - honesty
   - leadership.

3. NICE business standards additionally set out circumstances in which it may be inappropriate for a person to serve on a NICE committee. This may result in automatic disqualification from membership of a committee on a temporary or permanent basis.

4. Anyone meeting 1 or more of the categories below will be automatically disqualified from membership of any NICE committee:
   - a doctor who is under investigation by the General Medical Council, and who has had interim restrictions placed on their practice, or who has been removed from the Medical Register
   - other professionals who are under investigation for professional misconduct, or have been found to be in breach of appropriate professional standards by the relevant professional body
   - anyone who has received a prison sentence or a suspended sentence of 3 months or more in the last 5 years.

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3 ‘Committees’ includes any formally constituted body involved in developing NICE guidance including advisory bodies, Guideline Development Groups, panels and guidance committees

4 GMC ‘Investigation’ is defined as an investigation into whether the practitioner’s fitness to practice is impaired by reason of one or more of the heads of impairment set out in section 35c(2) of the Medical Act 1983
5. Anyone who meets any of the categories below will not be automatically disqualified, but they may be asked to step down from membership of a NICE committee at the sole discretion of NICE:

- a doctor who is under investigation by the GMC but has not been subject to any interim restrictions
- people who are the subject of a bankruptcy restrictions order or interim order
- anyone who has been dismissed (except by redundancy) by any NHS body
- in certain circumstances, people who have had an earlier term of appointment terminated
- anyone who is under a disqualification order under the Company Directors Disqualification Act 1986
- anyone who has been removed from trusteeship of a charity.

6. After an investigation, if a person is considered fit to practise by the investigating body, they will automatically be eligible for committee membership.

I accept the above conditions for committee membership:

Name:.................................................................

Signature:............................................................

Date:.................................