**NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE**

**Public Board Meeting held on 29 January 2020**

**at the All Nations Centre, Sachville Avenue, Cardiff, CF14 3NY**

These notes are a summary record of the main points discussed at the meeting and the decisions made. They are not intended to provide a verbatim record of the Board’s discussion. The agenda and the full documents considered are available in accordance with the NICE Publication Scheme.

Present

Professor Tim Irish Interim Chair

Professor Sheena Asthana Non-Executive Director

Professor Martin Cowie Non-Executive Director

Elaine Inglesby-Burke Non-Executive Director

Dr Rima Makarem Non-Executive Director

Tom Wright Non-Executive Director

Executive Directors

Sir Andrew Dillon Chief Executive

Professor Gillian Leng Health and Social Care Director and Deputy

Chief Executive

Alexia Tonnel Evidence Resources Director

Directors in attendance

Paul Chrisp Centre for Guidelines Director

Jane Gizbert Communications Director

Catherine Wilkinson Acting Business Planning and Resources Director

In attendance

Mirella Marlow Deputy Centre for Health Technology Evaluation Director

David Coombs Associate Director – Corporate Office (minutes)

# 20/001 APOLOGIES FOR ABSENCE

1. Apologies were received from Meindert Boysen.

# 20/002 DECLARATIONS OF INTEREST

1. The previously declared interests recorded on the register were noted, and it was confirmed there were no conflicts of interest relevant to the meeting.

# 20/003 MINUTES OF THE LAST MEETING

1. The minutes of the Board meeting held on 20 November 2019 were agreed as a correct record.

# 20/004 MATTERS ARISING

1. The Board reviewed the actions arising from the public Board meeting held on 20 November 2019 and noted that:

* Updates will be provided to the Board on the implementation of the data analytics statement of intent.
* The updated indicator process guide has been published.
* Outcomes data will be included in the impact reports where available and the cancer drugs fund will be referenced where applicable.
* The new director for science, evidence and analytics post will shortly be advertised.
* The updated Charter will be published alongside the NICE Principles.
* A future health and social directorate progress report will include an update on NICE’s engagement with the NHS England/Improvement regional directors.

# 20/005 CHIEF EXECUTIVE’S REPORT

1. Andrew Dillon presented his report which provided an update on the main programme activities and a summary of the financial position at the end of December 2019. At the end of this period, finance and operational performance is on track.
2. In response to a question from the Board, Mirella Marlow gave a brief update on NICE’s pilot evaluation of 5 digital health technologies. The Medical Technologies Advisory Committee were due to discuss the first topic at their meeting in January, but this was postponed due to circumstances beyond NICE’s control. It will now be discussed at the Committee’s next meeting in February.
3. The Board received the report.

# 20/006 FINANCE AND WORKFORCE REPORT

1. Catherine Wilkinson presented the report which outlined the financial position at 31 December and provided an update on workforce developments. At the end of this period there was a £2m underspend. This is forecast to reduce by the year-end due to cost pressures around NICE Connect and the move to the new London office, including a proposal to be discussed later in the meeting to purchase laptops and associated equipment. Catherine highlighted the update on workforce developments in the report, including the work to bring recruitment in house.
2. Board members asked a series of questions on the report, including about the risks to the income from technology appraisal (TA) and highly specialised technologies (HST) cost recovery, the arrangements for budget setting given the pay underspend, and the approach to talent management. In response, Catherine confirmed that there is a measured approach to budget setting, which factors in a likely vacancy rate. In addition, budgets are reviewed throughout the year, with underspends from vacancies centralised and reallocated as appropriate. Companies’ positive engagement with the new TA/HST cost recovery arrangements was noted. In relation to talent management, Catherine noted there will be a people, resources and governance strand of NICE Connect which will map current skills and identify gaps.
3. The Board received the report.

**20/007 WORKING WITH WALES TO IMPLEMENT NICE GUIDANCE**

1. Gill Leng welcomed Chris Connell and Julie Vile from the Field Team who presented the report that summarised NICE’s current engagement with the health, public health and social care sectors in Wales and future objectives for this work. Chris noted that Julie’s appointment as NICE’s first implementation facilitator for Wales has enabled NICE to drive forward its engagement with the Welsh health and care system in a systematic way. Recent successes include establishing links with the medical directors in the health boards and NHS trusts, and setting up a Welsh NICE health network with clinical and governance representatives from these organisations. Julie noted the priorities for future work, including strengthening relations with Health Improvement Wales.
2. The Board noted the report and supported the planned activities. It was suggested that it would be helpful to seek feedback from partners in Wales on the Field Team’s activities and whether this is focused on the right areas. This could take place in the summer once Julie had been in post for 18 months.

ACTION: Gill Leng

1. A member of the audience asked whether NICE is developing links with Care Inspectorate Wales. Julie stated that over the coming months she hoped to develop this relationship to reflect that with Health Improvement Wales.

# 20/008 IMPACT REPORT: DEMENTIA

1. Gill Leng presented the impact report on how NICE’s evidence-based guidance contributes to improvements in dementia care. The report highlighted a mixed picture: for example, while the number of people recorded with a diagnosis of dementia has increased, NHS Digital data estimates that only two thirds of people aged 65 of older with dementia have a formal diagnosis.
2. Board members welcomed the inclusion of data on people’s experience of care and support, although there was disappointment at the level of satisfaction reported. Given that much social care support is provided within families or privately commissioned, it was suggested there could be gaps in social care data sets which make it difficult to evaluate the impact of NICE’s guidance. Gill Leng highlighted that NICE is working with national partners as part of the Quality Matters initiative to identify suitable social care measures and the means to collect this data.
3. The increase in the number of short stay emergency admissions for people with dementia was noted and it was suggested that it may be helpful to look at how NICE guidance could inform decision making in emergency departments to address this.
4. The Board noted and welcomed the report. It was agreed that data on people’s experience of care should be included in future impact reports where possible, with care taken to ensure the colour schemes within the reports easily distinguish the different categories in charts and visuals, and that the data is consistent across the report.

ACTION: Gill Leng

# 20/009 CHAIR AND CHIEF EXECUTIVE APPOINTMENTS

1. Andrew Dillon provided a brief verbal update on the current Chair and Chief Executive recruitment. Following interviews in October, it is understood that the Secretary of State for Health and Social Care has identified a proposed appointee for the Chair role. This now awaits final approval. Interviews for the Chief Executive were held earlier this week; the process is now paused to enable the incoming Chair to engage with the appointment process.

# 20/010 AUDIT AND RISK COMMITTEE MINUTES

1. Dr Rima Makarem, chair of the Audit and Risk Committee, presented the unconfirmed minutes of the committee’s meeting on 28 November 2019. She advised that the Committee has since met in January, at which it was noted that the losses from train ticket cancellations were lower than reported to the Committee in November.
2. Following the Committee’s review of the risks around the London office move at its meeting in January, Alexia Tonnel and Catherine Wilkinson updated the Board on the risks around the IT infrastructure. The key issues relate to ensuring that the common IT solution meets NICE’s requirements and the AV facilities are confirmed in time to ensure they can be replicated in the Manchester office. It was noted that an experienced project manager is in place, with support from the Department of Health and Social Care for this flagship project.
3. The Board received the unconfirmed minutes.

# 20/011 MINOR AMENDMENTS TO THE NICE PRINCIPLES

1. Andrew Dillon presented the proposed minor amendments to the NICE Principles. Following the Board’s approval of the Principles in November 2019, final pre-publication checks identified that it would be helpful to include more detail on how NICE aims to reduce health inequalities. The additional text, under principle 9, is based on the Social Value Judgements (SVJ) and relates to how NICE considers conditions associated with stigma and behaviour-dependent conditions.
2. The Board approved the revised document subject to minor grammatical changes to paragraph 30 to clarify the references to stigma.

ACTION: Andrew Dillon

# 20/012 DIRECTOR’S REPORT FOR CONSIDERATION

1. Paul Chrisp presented the update from the Centre for Guidelines and highlighted points of note including the proposed revised approach to surveillance and updating guidelines, in which standing committees would work across multiple guidelines in broad topic areas to maintain living guidance. This would involve consolidating overlapping recommendations across a care pathway and working with stakeholders to identify priority areas to update. The ongoing collaboration with the Office for National Statistics to explore an automated method to identify related recommendations across related guidelines will support this work.
2. The Board noted the report and thanked Paul for the Centre’s work. The importance of ensuring clinical buy-in to the new approach was highlighted, and it was confirmed that the terms of reference for any new standing committee would be brought to the Board.

ACTION: Paul Chrisp

# 20/013 – 20/016 DIRECTORS’ REPORTS FOR INFORMATION

1. The Board received the Directors’ Reports.

# 20/017 LAPTOPS AND WORKSTATIONS: NEW EQUIPMENT FOR A NEW MOBILE WORKING ENVIRONMENT

1. Alexia Tonnel presented the proposal to purchase laptops, docking stations and softphones as part of the preparations for the move to the new London office, with the associated changes replicated across the rest of the organisation. She noted that a decision is required in short order as there is an opportunity to access funds for a bulk purchase in the current financial year using the current underspend, and to embed the new ways of working before the move to Stratford. The Department of Health and Social Care have indicated it would be appropriate to use the underspend in 2019/20 to purchase the required equipment. The Board’s approval is required as the expenditure is not in NICE’s business plan for 2019/20. Alexia stated that the total figure in the report, £650k, is a maximum, and purchasing decisions will be guided by the need to ensure the best use of public funds and will take account of the varying needs of staff.
2. Tom Wright stated that he understood and supported the direction of travel but queried whether the full budget requested was necessary. He noted the report identified three different groups of staff user and stated that cheaper alternatives may be more suitable for, or preferred by, some staff. He also highlighted the need for capacity within the IT department to configure and roll-out the proposed quantity of laptops.
3. Following discussion, the Board approved the proposal to spend up to £650,000 from the 2019/20 underspend on laptops, docking stations and softphones as set out in the paper. It was confirmed this was the maximum expenditure, and that any spending decisions would ensure value for public funds and recognise differing staff needs. It was agreed that the Board should receive information on the approach taken to ensure staff are allocated the most appropriate equipment for their role.

ACTION: Alexia Tonnel

# 20/018 ANY OTHER BUSINESS

1. None.

# NEXT MEETING

1. The next public meeting of the Board will be held at 1.30pm on 25 March 2020 at Wythenshawe Hospital, Manchester, M23 9LT