

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

**Public Board Meeting held on 16 November 2016 at the UHSM Academy,
Wythenshawe Hospital, Southmoor Road, Manchester M23 9LT**

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 David Haslam	Chair
Professor Sheena Asthana	Non-Executive Director
Professor Martin Cowie	Non-Executive Director
Tim Irish	Non-Executive Director
Andy McKeon	Non-Executive Director
Jonathan Tross	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
Ben Bennett	Business Planning and Resources Director
Professor Carole Longson	Centre for Health Technology Evaluation Director

Directors in attendance

Professor Mark Baker	Centre for Guidelines Director
Jane Gizbert	Communications Director
Alexia Tonnel	Evidence Resources Director

In attendance

David Coombs	Associate Director – Corporate Office (minutes)
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16/093 APOLOGIES FOR ABSENCE

1. Apologies were received from Dr Rosie Benneyworth, Professor Angela Coulter and Elaine Inglesby-Burke.

16/094 CONFLICTS OF INTEREST

2. None.

16/095 MINUTES OF THE LAST MEETING

3. The minutes of the public Board meeting held on 21 September 2016, and the minutes of the private Board meetings held on 21 September 2016 and 3 October 2016 were agreed as correct records.

16/096 MATTERS ARISING

4. The Board reviewed the actions arising from the Board meeting held on 21 September 2016.
5. It was noted that the latest finance and workforce report included the revisions requested at the last meeting; and the actions relating to uptake and impact report and annual workforce report will be addressed when these are next presented to the Board.
6. Ben Bennett stated that he would continue to explore whether it is possible to benchmark NICE's results in the staff survey regarding the proportion of staff who felt they had good opportunities to use their skills. The issues underlying this result will also be examined as part of the development of directorate/centre action plans in response to the staff survey.

ACTION: Ben Bennett

7. Jane Gizbert advised the Board that 1.1m of the 1.5m visits to the NICE website in October were from the UK. Of the 400,000 non-UK visits, the highest number came from the USA, which accounted for 59,000 visits.

16/097 CHIEF EXECUTIVE'S REPORT

8. Andrew Dillon presented his report, describing the main programme activities to the end of October 2016 and the financial position to the end of September. The report also includes the half year performance against the targets agreed with the Department of Health in NICE's balanced scorecard. Andrew highlighted the information in the report regarding the appointment of deputies to the Senior Management Team members.
9. Jonathan Tross referred to the information in the Communications Directorate report regarding the recent regional engagement events. He reflected on potential reasons for the level of attendance, and asked whether NICE could have done more to increase interest. Andrew Dillon agreed a combination of factors affected the size of the audience. He confirmed there will be a report to the Board on the outcome of the events, which will also reflect on the level of attendance, and whether to hold similar events in future.

ACTION: Jane Gizbert

10. The Board received the report.

16/098 FINANCE AND WORKFORCE REPORT

11. Ben Bennett presented the report which outlined the financial position as at 30 September 2016 and provided an update on the workforce strategy. The full year forecast out-turn is a £3m underspend against the revenue resource limit, which reflects the actions to prepare for the further reductions in NICE's income in 2017-18. Ben highlighted the additional information in the report on sickness absence, which had been requested by the Board.
12. The Board received the report.

16/099 ACCELERATED ACCESS REVIEW

13. Carole Longson presented the report that outlined the recommendations from the Accelerated Access Review (AAR) and the implications for NICE. Carole summarised the proposals from the AAR, including a call for streamlined mechanisms to prioritise emerging technologies and identify strategically important innovations; and for the NHS to work with innovators to accelerate approvals, speed up adoption, and evaluate technologies efficiently using new data sources. The Government will take forward the AAR as part of its forthcoming life sciences strategy, to which NICE will contribute.
14. Carole Longson stated that in addition to the Centre for Health Technology Evaluation (CHTE), the AAR's recommendations have implications for the Evidence Resources and Health and Social Care directorates. Carole highlighted NICE's input to the AAR, and thanked Mirella Marlow and Nina Pinwill in particular, for their contribution.
15. The Board discussed the AAR and the implications for NICE. Carole Longson noted the mechanisms already in place to speed up access to market for innovative new technologies. She highlighted the importance of identifying these technologies through horizon scanning so that NICE's evaluation can commence as early as possible and existing opportunities to accelerate appraisals are utilised. The forthcoming review of processes within CHTE, recently approved by the Board, provides opportunity to consider the scope for further efficiencies whilst maintaining the rigour of the appraisal process.
16. The Board discussed the proposed role for NICE in relation to structured incentives and tariffs to support the uptake of innovative technologies, noting this would build on existing activities in this area. NICE has previously supported the tariff setting process, by advising on the cost impact of new technologies and has also contributed to the development of incentives as part of the CQUIN framework.
17. The Board noted the potential challenge in measuring the proposed criteria for determining whether a product receives a transformative designation, and also

the wide variation in existing adoption of non-pharmaceutical medical technologies. NICE's ongoing activities in relation to assessing digital technologies was noted and welcomed.

18. The Board noted the report and NICE's actions to support implementation of the Accelerated Access Review.

16/100 NICE CHARTER

19. Jane Gizbert presented the proposed amendments to the NICE Charter for the Board's approval. She outlined the main changes and the requirement to review the Charter at least every three years.
20. The Board reviewed the Charter and requested additional amendments to reference the context in which NICE produces guidance, in particular taking account of the resources available to the health and care system and ensuring NICE guidance is produced in a timely manner. Paragraph 34 should also reference patients and carers as a target audience for NICE guidance. Subject to these amendments, the Board approved the Charter for publication. It was agreed that the Board should review the Charter annually.

ACTION: Jane Gizbert

16/101 APPROPRIATE DISINVESTMENT AND INVESTMENT: SUPPORT FROM NICE

21. Gill Leng presented the proposals to redesign NICE's support for investment and disinvestment. These are based on the principle that appropriate care offers opportunities for disinvestment, and a series of small disinvestment steps at various stages in the care pathway can aggregate towards large efficiency savings. Gill thanked Paul Chrisp, Programme Director, Medicines and Technologies, and recent Clinical Fellows at NICE for their contribution to the proposals.
22. Board members highlighted the importance of language that engages clinicians and patients. Whilst shared decision making can help deliver financial savings, it should be promoted by reference to the patient benefits rather than a means to disinvest in health and care interventions. Board members asked whether NICE could do more to assist the health and care system respond to the challenges of the constrained financial environment. In particular, it was suggested that guidance could include a more explicit business case for implementation, and there is a question as to whether NICE could provide greater support on how to implement guidance.
23. The Board approved the proposals and requested progress updates on this issue.

ACTION: Gill Leng

16/102 AUDIT AND RISK COMMITTEE MEMBERSHIP

24. David Haslam presented the paper on the proposed action to address the vacancies on the Audit and Risk Committee. He noted that whilst currently the committee includes five Non-Executive Directors (NEDs), Jonathan Tross, outgoing chair of the committee, has suggested that four NEDs may be sufficient.
25. The Board appointed Elaine Inglesby-Burke to the committee and delegated to David Haslam the authority to appoint up to two further NEDs to the remaining vacancies on the committee.

ACTION: David Haslam

16/103 VICE CHAIR AND SENIOR INDEPENDENT DIRECTOR (SID)

26. David Haslam presented the report that asked the Board to consider the action to be taken in respect of the Vice Chair and Senior Independent Director (SID), when the current holder of these roles, Andy McKeon, retires from the Board in May 2017. The Board previously agreed to combine the role of Vice Chair and SID. However, given the Chair proposes the candidate for Vice Chair to the Board, it may be appropriate to separate the SID and Vice Chair roles and appointment process in light of the SID's role in addressing any concerns regarding the Chair.
27. The Board appointed Rosie Benneyworth as the next Vice Chair following Andy McKeon's departure from the Board. It was agreed to remove the SID responsibilities from the Vice Chair at this time, so that the Chair does not propose the NED for appointment as SID. Instead, the NEDs would submit expressions of interest in being the SID to David Coombs, Associate Director, Corporate Office, following which the Board will appoint the SID without a recommendation from the Chair.

ACTION: David Coombs

16/104 DIRECTOR'S REPORT FOR CONSIDERATION

28. Gill Leng presented the update from the Health and Social Care Directorate. She drew the Board's attention to key items of note in the report, and highlighted additional matters not in the report including the forthcoming public consultation on public involvement in guidance production. Gill also highlighted the changes to the accreditation programme, and the ongoing strategic engagement activities including those with the National Quality Board and the Regional Medicines Optimisation Committees.

29. Following questions from the Board, Gill Leng confirmed that NICE has a leading role in the Shared Decision Making Collaborative, and through the field team, is seeking to engage with as many of the Sustainability and Transformation Plans as possible.
30. The Board received the report and thanked Gill Leng for the work of the Directorate.

16/105-16/108 DIRECTORS' REPORTS FOR INFORMATION

31. The Board received the Directors' Reports.

16/109 AUDIT AND RISK COMMITTEE MINUTES

32. The Board received the unconfirmed minutes of the Audit and Risk Committee held on 13 October 2016.
33. Jonathan Tross, chair of the Audit and Risk Committee, reminded the Board of the committee's approach to reviewing the risks facing NICE. He noted that the committee reviewed and commented on NICE's risk management policy, which includes the risk appetite. A revised risk appetite statement will be brought to the Board in February when it next reviews the risk register.

ACTION: Ben Bennett

34. David Haslam noted this was Jonathan Tross' last public Board meeting following ten years as a Non-Executive Director and chair of the Audit and Risk Committee. On behalf of the Board he paid tribute to Jonathan and thanked him for his outstanding contribution to NICE.

16/110 ANY OTHER BUSINESS

35. None.

NEXT MEETING

36. The next public meeting of the Board will be held at 1.45pm on 18 January 2017, at the University Hospital, Lewisham, SE13 6LH.