

Membership of Multimorbidity Guideline Committee

NICE National Institute for
Health and Care Excellence

The Committee will operate as an advisory Committee to NICE's Board, developing a guideline on Multimorbidity.

The terms of reference and standing orders for the Committee can be found in [appendix D of Developing NICE guidelines: the manual](#).

The Committee has 12 members.

Membership list

Name	Job Title, Organisation
Chair	
Bruce Guthrie	Professor of Primary Care Medicine, University of Dundee
Members	
Nina Barnett	Consultant Pharmacist, Care of Older People
Sam Barnett-Cormack	Lay member
Julia Botsford [Resigned on 26 March 2015]	Senior Admiral Nurse - Research and Practice Development
Carolyn Chew-Graham	Professor of General Practice Research, Research Institute – Primary Care and Health Sciences, Keele University
Andrew Clegg	Senior Lecturer & Honorary Consultant Geriatrician, University of Leeds & Bradford Teaching Hospitals NHS Foundation Trust
John Hindle	Consultant Geriatrician, Special Interest in Movement Disorders, Betsi Cadwaladr University Health Board
Jonathan Inglesfield	General Practitioner & Medical Director, NHS Guildford and Waverley CCG
David Kernick	General Practitioner
Emily Lam	Lay Member
Rupert Payne	Consultant Senior Lecturer in Primary Health Care, Centre for Academic Primary Care, University of Bristol
Alaster Rutherford	Primary Care Pharmacist Consultant, NHS Bath & North East Somerset CCG
Cate Seton-Jones	Medical Director and Consultant in

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	palliative medicine, Phyllis Tuckwell Hospice
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Date last reviewed: 16/08/2016

Declaration of Interests

The effective management of conflicts of interests is an essential element in the development of the guidance and advice that NICE publishes. Please refer to the NICE website for the [Policy on Conflicts of Interest](#).

Name	Job title, organisation	Declarations of Interest, date declared	Type of interest	Decision taken
Nina Barnett	Consultant Pharmacist, Care of Older People	<p>Initial declaration:</p> <p>Part of a project to develop patient information videos. Financial investment in the Patient Support programme.</p> <p>5/11/14:</p> <p>Shareholder for a company that produces patient information videos.</p> <p>Teaches health coaching for a company that receives funding from health companies and the NHS.</p> <p>Produces training packages for care homes with Aged Care Channel (ACC).</p> <p>Publishes narrative articles related to multimorbidity and specialist polypharmacy.</p> <p>17/3/15:</p> <p>Supporting Aged Care Channel with filming to provide information on good practice for care staff in care homes.</p> <p>22/1/16:</p> <p>Talk on respiratory medications and adherence, funded for by drug company.</p> <p>Talk at upcoming congress on medications and dysphagia, aphasia and patient centred polypharmacy. Organisation receives funding from pharmaceutical companies.</p> <p>Talk on pharmacy management on medicines optimisation and adherence. Organisation receives funding from pharmaceutical</p>	<p>None.</p> <p>Personal pecuniary interest</p> <p>Personal pecuniary interest</p> <p>Personal pecuniary interest</p>	<p>No action required</p> <p>Declare and participate</p> <p>Declare and participate</p> <p>Declare and participate</p>

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		companies.		
Sam Barntt-Cormack	Lay Member	<p>Initial declaration:</p> <p>Has been part of ad-hoc groups organised to campaign on issues around disability. No such work has focussed on multimorbidity, though it has come up in passing. Has made comments publicly on the importance of proper care in multimorbidity (probably without using that term).</p> <p>5/11/14:</p> <p>Has made statements on social media that care for people with multimorbidity needs to be better.</p> <p>Involved with a small national charity that is developing concerns for mental wellbeing.</p>	<p>Personal non-pecuniary</p> <p>Personal non-pecuniary</p>	<p>No action required</p> <p>Declare and participate</p>
Julia Botsford Resigned on 26/5/15	Senior Admiral Nurse - Research and Practice Development	<p>5/11/14:</p> <p>Currently on secondment to Dementia UK with a role to specifically promote admiral nursing. Specialist adviser to the CQC.</p>	Personal pecuniary	Declare and participate
Carolyn Chew-Graham	Professor of General Practice Research, Research Institute – Primary Care and Health Sciences, Keele University	<p>Initial declaration:</p> <p>I am a grant-holder on a number of research studies, some of which involve the evaluation of primary care interventions for people with multi-morbidity.</p> <p>5/11/14:</p> <p>A member of the Dialogue on Diabetes and Depression (DDD) and will be delivering training to a group of family physicians in Slovenia in November 2014 (unpaid work; travel and accommodation paid). Works with the Royal College of General Physicians (RCGP).</p> <p>10/6/16:</p> <p>Co-investigator on NIHR funded study PHR Project: 14/186/11 - Community pHarmacies Mood Intervention Study (CHEMIST).</p>	<p>Personal non-pecuniary</p> <p>Personal non-pecuniary Personal pecuniary</p> <p>Personal non-pecuniary</p>	<p>Declare and participate.</p> <p>Declare and participate.</p> <p>Declare and participate.</p>

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		Feasibility and Pilot Study		
Andrew Clegg	Senior Lecturer & Honorary Consultant Geriatrician, University of Leeds & Bradford Teaching Hospitals NHS Foundation Trust	<p>4/2/15:</p> <p>Leading work to develop and validate a frailty index based on routine primary care data. Funded by the NIHR (National Institute for Health Research) CLAHREC (The Collaboration for Leadership in Applied Health Research and Care) Programme.</p>	Personal non-pecuniary	<p>It was agreed that this declaration did not present a conflict for items on the day's agenda as the group would not be asked to consider evidence or draft recommendations on the topic. However, as AC is a recognised expert in this field, his contribution to introducing the topic to the group was very welcome. Later in</p>

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		<p>10/6/16:</p> <p>Leading work to develop and validate a frailty index based on routine primary care data. Funded by the NIHR (National Institute for Health Research) CLAHREC (The Collaboration for Leadership in Applied Health Research and Care) Programme.</p>	Personal non-pecuniary	<p>development, however, during presentation of future reviews on this topic, AC may be asked to reclude himself from discussions when group-work on drafting recommendations begins.</p> <p>Declare and withdraw</p>
Bruce Guthrie [GDG Chair]	Professor of Primary Care Medicine, University of Dundee	<p>Initial declaration:</p> <p>I have a research interest in multimorbidity, polypharmacy and guideline development for people with multimorbidity. Specifically, I have published papers that relate to guidelines and multimorbidity (cited below), and currently am Chief Investigator on a research grant from NIHR Health Services and Delivery Research Programme which is exploring how multimorbidity might be better accounted for in clinical guidelines (http://www.nets.nihr.ac.uk/projects/hsdr/11200327). This project includes NICE staff as co-applicants (Dr Phil Alderson and Dr</p>	Personal non-pecuniary interest	No action required

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		<p>Bhaish Naidoo). Finally, I was a co-applicant on a Scottish Government Chief Scientist Office funded study to develop and evaluate in a pilot trial a complex intervention to improve quality of life in younger people with multimorbidity living in very deprived area, and am a co-applicant on a current NIHR HS&DR funded study to develop and evaluate a general practice based complex intervention for people with multimorbidity (http://www.nets.nihr.ac.uk/projects/hsdr/1213015). I am therefore on record as stating that clinical guidelines do not currently address multimorbidity very effectively, and work is needed to remedy this, and am involved in several projects either seeking to improve guideline development in this regard or to provide evidence of effectiveness of interventions.</p> <p>5/11/14:</p> <p>Has research interests in multimorbidity and is working with NICE in this field. He has received funding to develop an intervention for management of people with multimorbidity. He has publicly stated that he believes current guidelines are unhelpful for multimorbidity.</p> <p>5/5/15:</p> <p>Research interest in multimorbidity, polypharmacy and guideline development for people with multimorbidity. Specifically, published papers that relate to guidelines and multimorbidity (cited below), and currently is Chief Investigator on a research grant from NIHR Health Services and Delivery Research Programme which is exploring how multimorbidity might be better accounted for in clinical guidelines (http://www.nets.nihr.ac.uk/projects/hsdr/11200327). This project includes NICE staff as co-applicants (Dr Phil Alderson and Dr Bhaish Naidoo).</p> <p>An element of this study was examining how best to compare treatments for different</p>	<p>Personal pecuniary Personal non-pecuniary</p> <p>Personal non-pecuniary</p>	<p>Declare and participate</p> <p>Declare and participate. Will not chair sessions examining this area of guideline.</p>
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		<p>conditions in terms of absolute benefit.</p> <p>Finally, was a co-applicant on a Scottish Government Chief Scientist Office funded study to develop and evaluate in a pilot trial a complex intervention to improve quality of life in younger people with multimorbidity living in very deprived area, and is a co-applicant on a current NIHR HS&DR funded study to develop and evaluate a general practice based complex intervention for people with multimorbidity (http://www.nets.nihr.ac.uk/projects/hsdr/1213015). Therefore on record as stating that clinical guidelines do not currently address multimorbidity very effectively, and work is needed to remedy this, and is involved in several projects either seeking to improve guideline development in this regard or to provide evidence of effectiveness of interventions</p> <p>23/10/15: Declared academic interest in the ways of presenting effectiveness of interventions.</p>	<p>Personal non-specific non-pecuniary interest</p>	<p>Agreed to act as an expert to the GDG when this area was discussed and the guideline lead would chair this section of the meeting</p>
John Hindle	Consultant Geriatrician, Special Interest in Movement	<p>Initial declaration: The declared interests are not directly relevant to the Guideline on Multimorbidity.</p>	<p>Personal pecuniary interests Non-</p>	<p>No action required</p>

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	<p>Disorders, Betsi Cadwaladr University Health Board</p>	<p>Honoraria received for provision of general educational events in the field of Parkinson's disease from-</p> <p>Lundbeck- £750 plus economy travel- An all-day board with other specialists, neurologists and geriatricians from around the UK discussing the Pharmaceutical management of Parkinson's. Includes reading and preparation time. Learning from other specialists was my key objective. January 2014.</p> <p>Teva- £1500 plus accommodation and economy travel- Chaired and organised a major two day national educational meeting- "Positive steps in Parkinson's disease". 238 attendees from the UK. Geriatricians, neurologists and nurses. Birmingham March 2014. One year preparation time including 4 teleconferences, organising the agenda, chairing the meeting. Excellent educational feedback.</p> <p>Teva- £500 plus economy travel and registration for the British Geriatrics Society national meeting Manchester- presented a debate on non-levodopa treatments in Parkinson's disease. Reading and preparation time, presentation of slides and delivery of the debate. April 2014</p> <p>I do not have any directorships or paid position and do not hold any consultancy post. I have not received any hospitality above what would be reasonably expected to attend meetings and conferences.</p> <p>Reviewer for Parkinson's UK Research Advisory panel.</p> <p>Research funding:</p> <p>NISCHR Rfppb. Cognitive rehabilitation in Parkinson's disease dementia. £178,000. 2013-15. PI J V Hindle.</p> <p>ESRC. IDEAL- Living well with dementia. £4.3m Hindle J V Co-applicant. PI Clare L. 2013-18.</p> <p>NISCHR AHSC Clinical research Fellowship. Hindle J V. £143,000. 2011-14</p> <p>HTA. £2,037,487 over 3 years. MUSTARDD-PD. A multicentre study of the</p>	<p>personal Pecuniary</p>	
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		<p>acetylcholinesterase inhibitor Donepezil in dementia of Parkinson's disease. PI Prof David Burn. 2012-15</p> <p>5/11/14: Received honoraria for provision of general educational events in the field of Parkinson's disease from Teva pharmaceutical company. Assistant Clinical Director at Bangor University and is paid by his NHS employer and Bangor University for his work there (2 sessions per week). Was trustee of the British Geriatric Society until May 2014. He receives research funding from the government and the Michael J Fox Foundation.</p> <p>6/5/15: Undertaken occasional fee paying medico-legal work which has included estimates of life expectancy.</p> <p>27/11/15: Received a grant to do a study on EEG neuro impact funded by the Betsi Cadwaladr Health Board.</p>	<p>Personal pecuniary</p> <p>Personal pecuniary non-specific</p> <p>Personal non-financial specific</p>	<p>Declare and participate</p> <p>Declare and participate</p> <p>Declare and participate.</p>
Jonathan Inglesfield	General Practitioner & Medical Director, NHS Guildford and Waverley CCG	<p>Initial declaration: GP Partner at an NHS Medical Practice (The Cranleigh Medical Practice, Surrey), with a significant cohort of individuals with multiple morbidity in respect of which the practice receives capitated income. Medical Director at NHS Guildford and Waverley CCG, employee status, with responsibilities including Commissioning of services in respect of Multiple Morbidity.</p> <p>5/11/14: Currently a GP in a large group practice.</p> <p>5/5/15: Leads programme on models of care in his</p>	<p>Personal pecuniary interest</p> <p>Personal pecuniary</p> <p>Personal</p>	<p>No action required</p> <p>Declare and participate</p>

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		practice.	non-pecuniary	Declare and participate.
David Kernick	General Practitioner	5/11/14: Holds positions on headache groups that receive pharmaceutical funding.	Personal pecuniary	Declare and participate.
Emily Lam	Lay Member	17/12/14: Lay member on the technical appraisal team at NICE.	Personal non-pecuniary	Declare and participate.
Rupert Payne	Consultant Senior Lecturer in Primary Health Care, Centre for Academic Primary Care, University of Bristol	Initial declaration: Conducts and publishes research in the field of multimorbidity and polypharmacy 17/12/14: Received funding for research from the NIHR. 27/11/15: Submitted a research grant proposal to NIHR RFPB to do a qualitative examination of de-prescribing anti-hypertensions. Will not start prior to the guideline finishing. 22/1/16: Has taken on a paid role as clinical editor for Prescriber Journal (from January 2016). Has also accepted a commitment (remunerated) to talk at a Clinical Pharmacy Congress in London in April 2016.	Personal non-pecuniary Non-personal pecuniary Personal non-pecuniary specific Personal pecuniary interest	No action required Declare and participate Declare and participate Declare and participate
Alastair Rutherford	Primary Care Pharmacist Consultant, NHS Bath & North East Somerset CCG	Initial declaration: Director, Rutherford Health Consulting Ltd [provides/provided expert pharmacist services to Bath & NESomerset CCG, SW CSU and other NHS bodies] Director, Verto Health Consulting [payment received from Astellas Pharma] Received travel expenses for one UK meeting from Astra Zeneca Received fees from Shire for a NICE implementation project.	Personal Pecuniary interest	No action required

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		<p>My wife is the owner and sole director of Banwell Village Pharmacy Limited which provides NHS Community Pharmacy Services in Banwell, North Somerset.</p> <p>17/3/15: Fee received from Insmad Incorporated [US orphan respiratory drug maker – no UK products either in own right or franchised] for advice on UK health system and NHS Specialised Commissioning. Drug currently with EMA is for specific rare chest infections not associated with multimorbidity.</p>	<p>Personal family interest</p> <p>Personal pecuniary interest</p>	<p>Declare and participate</p>
Cate Seton-Jones	Medical Director and Consultant in palliative medicine, Phyllis Tuckwell Hospice	<p>5/11/14: Works with a care organisation for over 65s.</p> <p>17/12/14: Works with the Phyllis Tuckwell Hospice, which receives numerous corporate and individual donations as it is a charity. Work with this organisation is as a palliative care consultant and senior manager, no direct involvement with fundraising.</p>	<p>Personal pecuniary</p> <p>Non-personal pecuniary</p>	<p>Declare and participate</p> <p>Declare and participate</p>

Date last reviewed: 16/08/2016