

**NICE Local Government Public Health External Reference Group
Meeting 9**

Friday 10th May 2013

Venue: Dee, NICE offices, Level 1A, City Tower,

Piccadilly Plaza, Manchester, M1 4BD

Final Minutes

Attendees:	<p><i>LGRG Members</i> Phillip Woodward (Chair), Penny Byrne, Dave Burnham, Dominic Harrison, John Illingworth, Jonathan McShane, Ian Reekie, Gerald Tompkins, Dagmar Zeuner</p> <p><i>NICE Team</i> Mike Kelly, Victoria Axe, Patricia Mountain, Ruairaidh Hill, Suzi Peden (via VC), Catherine Swann (via VC), Lesley Owen (via VC)</p> <p><i>Observers</i> Jessica Fielding (NICE), Rachel Kettle (NICE), Kay Nolan (NICE), Chris Weiner (NICE)</p> <p><i>Experts</i> Jackie Harrop (C4EO), David Herne (NHS Salford), Paulo Lisboa (Liverpool John Moores University)</p>
Apologies:	<p><i>LGRG Members</i> Liz Blenkinsop, Paul Brookes, Rachel Flowers, Sharan Jones, Maggie Rae, Carolyn Rule, Derek Ward</p>

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Version	Final
Audience	LGRG members, NICE team, the public (via web publication)

Item		Action
1. Welcome and introductions	<p>The Chair welcomed everyone to the ninth Local Government Reference Group (LGRG) meeting.</p> <p>The Chair informed the group that apologies had been received from Liz Blenkinsop, Paul Brookes, Rachel Flowers, Sharan Jones, Maggie Rae, Carolyn Rule and Derek Ward.</p> <p>The Chair welcomed the observers, Jessica Fielding, Rachel Kettle, Kay Nolan and Chris Weiner to the meeting.</p> <p>There were no members of public observing the meeting.</p>	
2. Declarations of Interests	<p>The Chair asked the LGRG if they had any additional declarations of interest.</p> <p>There were no further declarations made.</p> <p>The previously declared interests, noted at earlier meetings of LGRG, are available here http://www.nice.org.uk/aboutnice/whatwedo/aboutpublichealthguidance/LGRG.jsp</p>	
3. C4EO	<p>The Chair welcomed Jackie Harrop (JH) to the meeting. Jackie had no interests to declare. JH gave a presentation about C4EO.</p> <p>The Chair invited the LGRG to ask JH questions in regard to her presentation.</p> <p>The Centre Director noted that validity and fidelity are important methodological information that we need to be aware of in our deliberations and the work of C4EO is important in this regard.</p> <p>The Chair thanked JH for her presentation and commented on the links between the work of C4EO and the emerging role of NICE in social care. JH left the meeting at 11am.</p>	
4. Tuberculosis <ul style="list-style-type: none"> Consideration of the draft document (effectiveness/ cost effectiveness/ epidemiology/ 	<p>Catherine Swann (CS) and Suzi Peden (SP) joined the meeting at 11am via VC to present the briefing on Tuberculosis.</p> <p>The LGRG considered the draft document and a number of recommendations for amendment were made. These included reinforcing the importance of the JSNA, making amendments to the style and</p>	

<p>return on investment/ key audiences and local data)</p> <ul style="list-style-type: none"> Recommendations for amendment 	<p>clarifying the use of the term “hard to reach groups”.</p> <p>Action: the NICE team to add a list of the social risk factors to the briefing.</p> <p>There was a further discussion around roles and responsibilities and housing provision for these “hard to reach groups”.</p> <p>Action: the Chair to draft wording to clarify the statement on housing provision and to send this to the NICE team.</p> <p>Action: the NICE team to check the evidence which states that the highest levels of TB are in the non UK born population. The LGRG to send NICE any further data which may contradict this evidence.</p>	<p>NICE Team</p> <p>Chair</p> <p>NICE Team and LGRG</p>
<p>5. Tuberculosis</p> <ul style="list-style-type: none"> Summary of the discussions, agreed actions 	<p>The Chair gave a summary of the discussions which had taken place which included the following:</p> <ul style="list-style-type: none"> admission of contacts tracing roles and responsibilities for commissioning what should be done and who should be doing it clarifying facts and figures of survival and post diagnosis diagnosis in rural areas and areas that are more prevalent and hard to reach terminology and what the risk factors might be. <p>CS and SP left the meeting at 11.45am.</p>	
<p>6. Return On Investment</p> <ul style="list-style-type: none"> Feedback from road testing, DH and PHE Final viewing by LGRG 	<p>Lesley Owen (LO) joined the meeting at 11.55am and gave feedback on the Return on Investment briefing and infographic from the road testing, the Department of Health and Public Health England.</p> <p>The LGRG commented on these documents.</p> <p>Action: the NICE team to amend all documents to suit the new NHS world post April 1st, which included amending the NICE name, to National Institute for Health and Care Excellence.</p> <p>Action: the NICE team to look at links with the new economics foundation.</p> <p>There was a discussion around the timescales of investment and long and short term financial gains.</p> <p>Action: the NICE team to amend Bury council to its full title.</p> <p>The LGRG agreed that the infographic could be a</p>	<p>NICE Team</p> <p>NICE Team</p> <p>NICE Team</p>

	<p>“stand alone” document and did not need to link to the briefing.</p> <p>The NICE team will discuss whether the ROI briefing should return to the next meeting in July.</p> <p>The Chair thanked LO and LO left the meeting at 12.25pm.</p>	
<p>7. Salford Model – health inequalities tool</p>	<p>David Herne (DH) and Paulo Lisboa (PL) joined the meeting at 12.25pm and had no interests to declare. DH and PL introduced their health inequalities tool to the LGRG.</p> <p>DH and PL explained that the tool is constructed from mathematical associations and probabilities between a set number of indicators.</p> <p>DH and PL were asked a number of questions in regard to their tool including whether the model could be implemented across other boroughs.</p> <p>Action: the NICE team to circulate the slides and DH and PL’s contact details to the LGRG.</p> <p>Mike Kelly invited the LGRG to contact DH and PL should they wish to have further information on the model.</p> <p>DH and PL noted that phase 2 of the model will incorporate sub district level data and that they would be interested to hear any further suggestions for development.</p> <p>DH and PL left the meeting at 1.20pm.</p>	<p>NICE Team</p>
<p>8. Social and emotional wellbeing of children and young people</p> <ul style="list-style-type: none"> • Consideration of the draft document (effectiveness/ cost effectiveness/ epidemiology/ return on investment/ key audiences and local data) • Recommendations for amendment 	<p>Ruaraidh Hill (RH) joined the meeting at 1.35pm and presented the briefing on social and emotional wellbeing for children and young people.</p> <p>The LGRG considered the draft document and a number of recommendations for amendment were made. These included comments around the format, as well as a request to update any evidence.</p> <p>Action: the NICE team to update the briefing</p>	<p>NICE Team</p>

<p>9. Social and emotional wellbeing of children and young people</p> <ul style="list-style-type: none"> Summary of the discussions, agreed actions 	<p>The Chair thanked RH for his presentation and noted that the LGRG had agreed that the overall framework on this briefing was good.</p> <p>RH left the meeting at 2pm.</p>	
<p>10. Update on Briefings</p> <ul style="list-style-type: none"> Contraceptive services Spatial Planning 	<p>Mike Kelly (MK) gave an update on the contraceptive services and spatial planning briefings. It was noted that both briefings had been paused however it was hoped that they would be published in due course.</p> <p>It was confirmed that the Obesity briefing would be published on 22nd May.</p>	
<p>11. Update</p>	<p>MK noted that the LGRG Methods and Process manual and the terms of reference and standing orders were now on the NICE website. The Chair reminded the group that the terms of reference and standing orders state that members should not miss two consecutive meetings and should aim to attend at least 75% of the meetings within the year.</p> <p>MK discussed the changes that had affected NICE and the Centre for Public Health since April 1st with the group.</p> <p>MK noted that NICE will be recruiting future members with expertise in social care in the summer.</p>	
<p>12. Recommendations for future Local Government Briefings</p>	<p>The Chair asked for recommendations for future local government briefings. The need for a briefing around partnership working was discussed. The group also suggested future briefings on reducing social isolation, gambling and healthy eating.</p> <p>Action: the NICE team to take these suggestions back to the LGRG Internal Steering Group.</p> <p>MK noted the briefings that were due to publish in 2013. These included:</p> <ul style="list-style-type: none"> Obesity Return on Investment Tuberculosis Social and emotional wellbeing in young people BMI/BME Hard to reach communities (title to be confirmed) Health checks Children at risk 	<p>NICE Team</p>
<p>13. LGRG Next</p>	<p>MK presented the timelines for the future publication of</p>	

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Steps	<p>briefings.</p> <p>It was noted that future LGRG meetings would take place on the following dates:</p> <p>12th July 2013 13th September 2013 15th November 2013</p>	
14. Minutes of the Last Meeting	The minutes of LGRG 8 were accepted as a correct record of the last meeting subject to one minor amendment.	
15. AOB	<p>The Chair noted that NICE is completing work internally on equality standards within committees. An email will be sent to members of the group inviting them to participate in a brief survey in regard to disability. It was also noted that impacts on inequalities should be considered in all briefings.</p> <p>There was no other business.</p>	
16. Close	The meeting closed at 2.35pm	