

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Senior Management Team

Minutes of the meeting held on 27 January 2015

Present

Andrew Dillon	Chief Executive
Gillian Leng	Director – Centre for Health and Social Care
Jane Gizbert	Director - Communications
Ben Bennett	Director – Business Planning and Resources
Mark Baker	Director – Centre for Clinical Practice

In attendance

Julian Lewis	Governance Manager – Corporate Office
Nina Pinwell	Associate Director – Topic Selection

Apologies

1. Apologies were received from Carole Longson, Alexia Tonnel and Alana Christopher.

Freedom of Information and Publication Scheme

2. Final documents will be made available on the NICE website in accordance with the Publication Scheme, subject to the redaction of exempt material.

Note of the previous meeting

3. Ben Bennett advised that Alexia Tonnel had requested paragraph seven be amended to read “Alexia Tonnel gave a further update on progress with the work stream which NICE and PHE co-chair for the National Information Board to consider the accreditation of health and social care apps. She explained that the aim is to provide citizens with apps that are endorsed and ‘trusted’ by the NHS. Next steps include literature review of health apps, gathering information on the UK app market and understanding the regulatory environment. It was noted that a segmentation / classification for apps will need to be developed to identify a workable model of endorsement.”
4. With this amendment the minutes of the 20 January were approved as a correct record.

Matters arising

5. SMT noted all actions are in hand.

Board actions

6. SMT noted the Board had agreed the uptake report should include more data on social care and this would be incorporated in future reports.
7. The Board further recommended that due diligence criteria be developed to guide decisions third party funding for overseas activity.

Office for Market Access

8. Nina Pinwell presented a proposal to proceed with the establishment of the Office for Market Access within the CHTE together with an analysis of how additional savings could be realised in CHTE to offset the costs of establishing the OMA as previously requested by SMT. She said net savings amounted to £57k in 2015-16, increasing to £366k in 2016-17.
9. She explained that the landscape for R&D, regulation and adoption of new technologies was rapidly changing with, for example, the regulatory process supporting earlier market entry of promising new medicines. In parallel with this the government is actively supporting the life sciences sector as a key driver of business growth.
10. She said that this had led to the creation of a new Innovation, Growth and Technology Directorate within the DH which had joined with the life sciences functions within the Department of Business, Industry and Skills to form a new Office for Life Sciences (OLS).
11. Nina Pinwell explained that this had placed the NICE work on technology evaluation, engagement and outreach activities in a pivotal position to influence the life sciences sector but to maximise the potential of this it required a dedicated and visible function with which to engage with the OLS.
12. Gill Leng queried the relative benefits of a service primarily directed at advising industry set against other guidance priorities and funding pressures.
13. Andrew Dillon said that developing the OMA as a point of access for industry to engage with NICE would enable them to get a better understanding of how they get their products accepted. He said it would enhance the position of NICE as a focus for industry engagement with health and social care.
14. SMT discussed the relative merits of different funding options for the proposed OMA linked with consultancy functions in CHTE and agreed the paper should be re-cast to provide fully costed options to include charging and a subscription service and a projection for how the OMA may develop in the event of high demand.

ACTION: NP

15. Andrew Dillon said he would discuss the proposal further with Carole Longson.

ACTION: AD

NHS England 5 Year Forward View

16. Andrew Dillon presented recent correspondence from NHS England on forward planning for 2015/16 to support an integrated approach across key national bodies to support the long term transformation of the NHS.
17. SMT noted there were several areas in which NICE was already engaged and further commentary would be helpful to understand how they were being taken forward and several related to quality controls where NICE would want an input.
18. Andrew Dillon said he would contact Simon Stevens to find out about the overall governance arrangements and the leads in key areas where NICE could make a contribution to discuss the arrangements that were in place and report back to SMT.

ACTION: AD

19. Ben Bennett advised SMT that Alexia Tonnel will bring to SMT the Terms of Reference for the work stream NICE is co-chairing with Public Health England on NHS accredited health apps.

ACTION: AT

Finance and Facilities Management of Change

20. Ben Bennett introduced proposed changes to the structure of the finance and facilities teams within BPRD which flowed from the decision for finance to manage the facilities team. He said the aim was to reduce the number of direct reports to the BPRD from five to four and to re-prioritise limited resources to strengthen the payroll and audit liaison function and give additional support to the facilities team. The proposals were expected to cost an additional £30k to be funded from rental income from the Manchester offices which arose from savings in the finance team offset against an additional 0.5wte Associate Director Finance.
21. Gill Leng queried the facilities structure and in particular the absence of sufficient middle management in Manchester to support the larger office.
22. Andrew Dillon sought assurance on the projected figures for rental income and expenditure for the sub-tenancy in Manchester and the top-slicing of the income to fund the restructuring.
23. The proposal was agreed.

ACTION: BB

Safe Staffing

24. SMT noted correspondence from the DH on a new topic for safe staffing guidance. Mark Baker advised SMT that the guidance could be funded from projected underspend in 2015/16 but if there was no slippage in other CCP guidance there would be a resultant overspend.

ACTION: MB

Triennial review

25. The SMT reflected on the briefing the Board had received from the review team at its meeting in Maidstone. The consensus was that it had been positive and appeared to suggest a relatively uncontentious report. He said the Stage 1 report was due in early February and the draft final report due in March.

Weekly staff SMT updates

26. SMT agreed the staff updates.

ACTION: JL

Any other business

27. Nina Pinwell advised SMT of potential problems with the room bookings system. Ben Bennett said scoping work was in progress to identify and purchase a new dedicated room bookings system to replace the current arrangements but he would investigate the current issues in the meantime.

ACTION: BB

28. Gill Leng said she had received helpful suggested changes to the position statement from the GMC. SMT agreed that she should have delegated authority to decide on final changes and then make the statement available on the web site.
29. Gill Leng advised SMT of a technical issue with the management of change consultation in HSC which was being resolved with the HR consultant.
30. Mark Baker advised SMT that an embargoed senior post in CCP covering clinical methodology will expire at the end of March. He explained the previous challenges of getting sufficient applicants in the past via NHS Jobs and recommended external advert. SMT agreed that the job should first be restricted to internal advert to ensure it was open to relevant staff at risk in HSC. If this proved unsuccessful the post should be advertised externally.

ACTION MB

FINAL

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