**NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE**

Public Board Meeting
held on 17 November 2021 at the Royal College of Physicians and via Zoom

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.

## Board members present

Tom Wright Non-Executive Director (meeting chair)

Dr Mark Chakravarty Non-Executive Director

Jackie Fielding Non-Executive Director

Dame Elaine Inglesby-Burke Non-Executive Director

Alina Lourie Non-Executive Director

Dr Justin Whatling Non-Executive Director

Professor Gillian Leng Chief Executive

Meindert Boysen Centre for Health Technology Evaluation Director

Dr Paul Chrisp Centre for Guidelines Director

Jennifer Howells Finance, Strategy and Transformation Director

Alexia Tonnel Digital, Information and Technology Director

## Directors in **attendance**

Nicole Gee Interim Chief People Officer

Jane Gizbert Communications Director

Dr Felix Greaves Science, Evidence and Analytics Director

Dr Judith Richardson Acting Health and Social Care Director

## In attendance

Professor Tim Irish Life Sciences Adviser

Chris Connell Associate Director, Field Team

Kendall Jamieson Gilmore Associate Director, Strategy and Interim Chief of Staff

David Coombs Associate Director, Corporate Office (minutes)

Pilar Pinilla-Dominguez Associate Director, NICE International (Item 7)

Zoe Garrett Senior Technical Adviser, Science Evidence and Analytics (Item 7)

Sara Buckner Technical Adviser, Centre for Guidelines (Item 8)

Jennifer Beveridge Senior Analyst, Health and Social Care (Item 10)

Dominick Moran Analyst, Health and Social Care (Item 10)

Cheryl Pace Implementation Manager, Health and Social Care (Item 10)

## Apologies for absence (item 1)

1. Apologies were received from Sharmila Nebhrajani and Professor Gary Ford.
2. In the absence of the Chairman, and with the Vice Chairman position temporarily vacant, the Board appointed Tom Wright, the Senior Independent Director, as chair of the meeting in line with the standing orders.

## Declarations of interest (item 2)

1. Elaine Inglesby-Burke declared that she has been appointed as Interim Chief Nursing Officer at Liverpool University Hospitals NHS Foundation Trust, and it was noted the register of directors’ interests would be updated accordingly. This, and the directors’ previously declared interests recorded on the register were noted and it was confirmed there were no conflicts of interest relevant to the meeting.

## Minutes of the last meeting (item 3)

1. The minutes of the Board meetings held on 15 September 2021 were agreed as a correct record.

## Action log (item 4)

1. The Board noted the progress with the actions arising from the public Board meeting on 15 September 2021 and those open from preceding meetings. Those marked closed on the log were confirmed as complete.

## Report from the Executive Team (item 5)

1. Gill Leng presented the Executive Team report to the Board, which covered key priorities and areas of progress with the strategy since the last Board meeting, including the work to scope the proposed Life Sciences Hub on the website; the assessment of MAGICapp as a tool for developing and publishing dynamic living guidelines; and the current refresh of the implementation strategy. Gill highlighted the publication of the updated guideline on the diagnosis and management of myalgic encephalomyelitis (or encephalopathy)/chronic fatigue syndrome following a roundtable meeting with representatives from a range of patient and professional organisations, and the new draft guideline to increase access to health and social care services for people experiencing homelessness that was jointly published with the Centre for Homelessness Impact (CHI).
2. The work underway on health inequalities was noted and welcomed, and a question was raised as to whether NICE could shift from national recommendations towards a more localised approach targeted on inequalities. In response, it was noted this would in part depend on whether data is available to support recommendations targeted at a more localised level. The new Integrated Care Systems will have a central role in looking at inequalities in their area and therefore it will be important for NICE to engage with these entities and highlight the NICE products that can be of most help in addressing inequalities. Given the Board’s interest in this topic, Judith Richardson offered to provide further information in early 2022 on the scope to utilise the prototype equity impact calculator developed with the University of York and also the outcome of the current review of NICE’s approach to addressing health inequalities.

Action: Judith Richardson

1. It was noted that the outcome of the evaluation of MAGICapp as an authoring and publishing tool will be brought to the Board in early 2022, and if MAGICapp is not felt to be the appropriate solution then alternatives will need to be explored as part of the consideration of the next steps. The importance of looking at end users’ needs was highlighted to ensure the structured content can be integrated with other systems.
2. Subject to the above comments, the Board noted the report.

## Integrated performance report (item 6)

1. Jennifer Howells presented the integrated performance report, which provided data on progress with the business plan objectives and deliverables; the status of key performance indicators; and the financial position at the end of September 2021. Jennifer summarised the position with the business plan objectives, noting the decision to deprioritise 26 objectives in light of capacity challenges and the Board’s feedback about the number of objectives in the business plan. The remaining objectives are those most important to delivering the strategy, and since the last Board meeting the trajectory with these has either improved or remained stable. Jennifer outlined progress with the delivery of the guidance and supporting outputs listed in the business plan, highlighting where the year-end targets will not be met, including for diagnostics and medical technologies guidance. It was noted that the financial position at the end of month 6 was an underspend of £773k and the year-end forecast is an underspend of £0.9m.
2. The Board discussed the workforce challenges and noted that the number of vacancies has fallen since July. The Board queried the relationship between the ongoing workforce challenges and the published guidance outputs, which largely remain on track. Jennifer Howells stated that currently the report is focused on the publication of products. These will have been in development for a number of months, and therefore the figures do not reflect the full impact of current vacancies, which will impact on topics that will publish in the future. The intention is to continue to refine the report to better reflect the current impact of workforce pressures on guidance production.
3. The Board noted the report. It was noted that the outcome of the 2021/22 business plan prioritisation would be circulated to the Board for information.

Action: Jennifer Howells

## International strategy for NICE (item 7)

1. Meindert Boysen introduced the international strategy for NICE, which had been developed jointly by the NICE International and Science, Policy and Research teams. Meindert highlighted that the Board reviewed an earlier draft of the high level proposals in September, and once the strategy is agreed at this meeting, a more visually attractive summary document will be produced for publishing to external audiences.
2. Pilar Pinilla-Dominguez provided further detail on the strategy, which outlines the direction and priorities for NICE’s international engagements and partnerships over the next 3 years, focused on two ambitions: to enhance NICE’s reputation as a world-leading institution by sharing the learning and expertise of NICE internationally; and to develop a proactive international intelligence for NICE by establishing collaborative relationships and projects aligned with NICE’s priority areas. Pilar noted that the strategy has been developed collaboratively and its delivery will require input from across NICE.
3. The Board discussed the strategy, noting that NICE’s lead minister is supportive of the Institute undertaking an international leadership role. There was encouragement from the Board to strengthen the external focus of the strategic ambitions by highlighting NICE’s contribution to global health priorities, and it was also recommended that the strategy considers international projects that could be undertaken collaboratively to deliver the objectives in NICE’s strategy, particularly where these will be areas of common challenge, such as computable guidelines.
4. The Board approved the strategy subject to strengthening the reference to NICE contributing to global health priorities and projects that could be undertaken collaboratively to deliver NICE’s strategy.

Action: Meindert Boysen

## Developing NICE guidelines: the manual (item 8)

1. Paul Chrisp presented the report that outlined the updates to the manual for developing NICE guidelines and highlighted the material changes, which entail a shift to more proactive surveillance, and a flexible approach to consultation that is proportionate to the level of changes to the guideline. Paul noted that this initial update lays the foundations for more substantive changes in 2022/23 including a prioritised portfolio, living guidelines and user-centred design.
2. The Board agreed to the publication of the updated manual.

## Changes to guideline development arrangements (item 9)

1. Paul Chrisp presented the report that set out changes to the guideline development arrangements following the unsuccessful tender for the external guideline development centre contracts. He confirmed that work is underway to prepare for the transfer of approximately 100 staff currently working for the National Guidelines Alliance (NGA) and National Guideline Centre (NGC) to NICE on 1 April 2022, overseen by a project board that will manage interdependencies and address issues such as governance, planning and risk management; staff due diligence, transfer and legal process; information technology hardware and systems; estate and assets register; communications; finance and budgets. The transfer also provides the opportunity to review the operating model for guideline development to transition to living guidelines in prioritised topic suites, and to review NICE's strategic engagement with the Royal Colleges that host the NGC and NGA.
2. The Board discussed the implications of the transfer and noted the potential risk of temporary disruption to guideline development as a result. Paul Chrisp stated that the implications of the transfer on the completion of the topics that are currently in progress at the NGA and NGC are being explored, along with the impact of the shift to prioritised topic suites on the topics that have been referred to NICE but are not yet in progress. Paul confirmed that further information would be provided to the Board on how the transferring staff will support delivery of the new guidelines operating model, and the impact on the relationship with the two Royal Colleges.

Action: Paul Chrisp

1. The Board noted the update.

## NICE impact report: people with a learning disability (item 10)

1. Judith Richardson presented the report that outlined how NICE’s evidence-based guidance is being used to help improve outcomes for people with a learning disability. Jennifer Beveridge highlighted points of note in the report, including an increase in health checks for people with a learning disability in line with NICE recommendations, and also less positive data such as ongoing long-term hospital care and persistent prescribing of antipsychotic medication.
2. The Board received the report and noted the next steps identified in the report to encourage implementation of the relevant NICE guidance.

## Revisions to standing orders and standing financial instructions (item 11)

1. Jennifer Howells presented the amended standing orders and standing financial instructions, which had been reviewed and endorsed by the Audit and Risk Committee in September. The changes follow review of similar documentation in other health arms length bodies and external advice, and form part of the business plan objective to empower staff and streamline decision making. Jennifer confirmed that the documents will continue to be reviewed annually, with substantive amendments brought to the Board for approval.
2. The Board approved the standing orders and standing financial instructions.

## Audit and Risk Committee minutes (item 12)

1. Tom Wright presented the unconfirmed minutes of the Audit and Risk Committee meeting held on 5 September 2021 and highlighted the committee’s review of the strategic risks, particularly around financial resources in the context of the spending review and workforce capacity challenges. Other key items discussed included cyber security and data analytics.
2. The Committee noted the unconfirmed minutes.

## Any other business (item 13)

1. There was no further business to discuss.

## Next meeting

1. The next public meeting of the Board will be held on 19 January 2022 at 1:30pm.