**NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE**

**Public Board Meeting held on 20 November 2019**

**at the Post Graduate Education Centre, Great Ormond Street Hospital,**

**London WC1N 3JH**

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 Tim Irish Vice Chair and Non-Executive Director

Professor Sheena Asthana Non-Executive Director

Professor Martin Cowie Non-Executive Director

Elaine Inglesby-Burke Non-Executive Director

Dr Rima Makarem Non-Executive Director

Tom Wright Non-Executive Director

Executive Directors

Sir Andrew Dillon Chief Executive

Ben Bennett Business Planning and Resources Director

Professor Gillian Leng Health and Social Care Director and Deputy

Chief Executive

Alexia Tonnel Evidence Resources Director

Directors in attendance

Meindert Boysen Centre for Health Technology Evaluation Director

Paul Chrisp Centre for Guidelines Director

Jane Gizbert Communications Director

In attendance

David Coombs Associate Director – Corporate Office (minutes)

# 19/095 APOLOGIES FOR ABSENCE

1. Apologies were received from Sir David Haslam, with Tim Irish chairing the meeting in his absence.

# 19/096 DECLARATIONS OF INTEREST

1. Tim Irish noted that the register of interests has been updated to include his recent appointment as a Non-Executive Director of Rutherford Health plc. This and the other declared interests on the register were noted, and it was confirmed there were no conflicts of interest relevant to the meeting.

# 19/097 MINUTES OF THE LAST MEETING

1. The minutes of the Board meeting held on 18 September 2019 were agreed as a correct record.

# 19/098 MATTERS ARISING

1. The Board reviewed the actions arising from the public Board meeting held on 18 September 2019 and noted that:

* The Board’s comments about smoking in pregnancy that arose from the impact report on maternity and neonatal care will be fed into NICE’s routine engagement with Public Health England (PHE).
* Social and digital media will be included in the media monitoring contract when this is retendered by the Communications directorate.

# 19/099 CHIEF EXECUTIVE’S REPORT

1. Andrew Dillon presented his report which provided an update on the main programme activities to the end of October 2019 and summarised the financial position at the end of September. At the end of this period, finance and operational performance is on track.
2. The Board received the report.

# 19/100 FINANCE AND WORKFORCE REPORT

1. Ben Bennett presented the report which outlined the financial position at 30 September 2019 and provided an update on workforce developments. At the end of this period there is a £1.3m underspend. The full-year forecast is for the underspend to reduce to £0.5m due to cost pressures later in the year around NICE Connect and the move to the new London office. Ben highlighted the latest position with income from the technology appraisal and highly specialised technologies programmes and also noted the ongoing positive progress with the work to bring recruitment in-house.
2. The Board received the report.

**19/101 WIDENING THE EVIDENCE BASE: THE USE OF BROADER DATA AND APPLIED ANALYTICS IN GUIDANCE DEVELOPMENT**

1. Gill Leng presented the report that summarised the feedback from the consultation on the ‘statement of intent’ for the future use of data and analytics within NICE’s guidance programmes and wider products, and NICE’s response. The consultation feedback was overall positive, with comments informing additions and clarifications to the statement. Detail on methodological considerations will be developed and embedded in methods guides.
2. Board members welcomed the report and NICE’s intentions in this area. The need for caution about new data sources was noted, in particular to be mindful of the risks of bias in, and uneven coverage of, data sets. It will also be important to consider the hierarchy of evidence. Gill Leng noted these are among the questions to explore further, in conjunction with academic partners.
3. The Board agreed the changes to the statement of intent and supported the proposed next steps for the Data and Analytics transformation programme. The Board requested regular progress updates on this work.

ACTION: Alexia Tonnel

1. A member of the audience noted the risks in new data sources but highlighted that all data has a vulnerability to bias, including data more traditionally used. They noted that some questions will require trial data, whereas others are suited to alternative data sources.

**19/102 RESPONSE TO CONSULTATION ON THE DRAFT NICE PRINCIPLES**

1. Andrew Dillon presented the report that summarised comments on the draft NICE Principles during a public consultation, and outlined an updated version to address the feedback received. Andrew noted that the Principles will be a key document setting out how NICE develops guidance, and highlighted the importance of explaining how evidence is converted to the recommendations that impact on the provision of health and care services. The Principles will also help ensure consistency between committees. Andrew thanked stakeholders for their feedback on the previous draft Principles, which helped create an improved document.
2. The Board approved the NICE Principles. These will succeed the Social Value Judgements (SVJ) as the working document for NICE advisory committees, with the SVJ available on the website as an important underpinning document.
3. A member of the audience queried why the Principles do not include the four moral principles in the SVJ document of respect for autonomy, non-maleficence, beneficence, and distributive justice. They noted that the Principles refer to choice and suggested the need to refer to ‘thought out’ choice. In response, Andrew Dillon noted the importance of using language that is easily understood, and stated these four principles are unlikely to be accessible to a wide audience. In relation to choice, he noted that the Principles refer to ‘informed’ choice, which he believed addressed the issue raised.
4. A member of the audience, a former NICE director who helped develop the original SVJ document, welcomed the changes made following the consultation, and stated that in his view, the document sets out what NICE does to a general audience. He highlighted the importance of considering how to implement the Principles.
5. In response to comments about the cost effectiveness threshold, NICE’s senior departmental sponsor who was in the audience highlighted that the threshold was confirmed as part of the recent five year agreement between the Department for Health and Social Care and the Association of the British Pharmaceutical Industry. She also noted that NICE’s arrangements have evolved including the introduction of the end of life modifier and the higher threshold for the highly specialised technologies programme.

# 19/103 INDICATOR PROCESS GUIDE

1. Gill Leng presented the report that summarised the feedback from the consultation on the updated indicator process guide and NICE’s proposed response. Gill noted consultees were supportive of the substantive changes, and gave feedback that has led to some further changes including to increase visibility of indicator progression and considering the need to consult on an indicator’s proposed retirement from the NICE menu. In addition, there will now be line by line responses given to stakeholder comments submitted to indicator consultations.
2. Gill noted the paper produced by NICE staff and GP academics from the University of Cambridge and the University of Edinburgh on the impact of removing financial incentives on the quality of care, which received a Royal College of General Practitioners award.
3. In response to a question from the Board about the indicator selection process, Mark Minchin, the Associate Director for the indicator programme, stated that NICE is increasingly working more closely with key partners at the selection stage to ensure indicators are developed that meet partners’ needs.
4. The Board approved the updated indicator process guide for publication in December 2019.

ACTION: Gill Leng

# 19/104 IMPACT REPORT: LUNG CANCER

1. Gill Leng presented the impact report on how NICE’s evidence-based guidance contributes to improvements in lung cancer care. Gill noted the external commentary from the Clinical Director for the Centre for Cancer Outcomes, and advised the Board that the activities to promote the report will take place once the general election ‘purdah’ period restrictions end.
2. The Board discussed the process for selecting the topics for the impact reports and noted that the key determinant is the availability of national data. It was suggested that it may be helpful to liaise with the relevant professional bodies to give them advance notice of the topics, as these organisations may want to plan their engagement activities to utilise the impact reports.
3. It was noted that the report did not include outcomes data, and this will be included in future reports where available. It was also agreed that the cancer drugs fund should be referenced in future impact reports where appropriate.

ACTION: Gill Leng

# 19/105 A NEW DIRECTOR POST FOR SCIENCE, EVIDENCE AND ANALYTICS

1. Gill Leng presented the report that set out a proposed new director role for science, evidence and analytics, alongside the associated changes in related senior management roles. As noted in the report, the role will increase senior management capacity in an area of strategic importance for NICE. Following approval by the Board, the NICE and Department for Health and Social Care Remuneration Committees will be asked to agree the role’s salary.
2. The Board approved the creation of the new director post and the associated senior management changes. It was agreed that the job description should reference the role’s contribution to the NICE Connect transformation programme.

ACTION: Gill Leng

# 19/106 NICE CHARTER

1. Jane Gizbert presented the paper that set out proposed amendments to the NICE Charter following its annual review. The main change is to reference the NICE Principles agreed earlier in the meeting, with other minor updates also made throughout. Following agreement by the Board, the updated Charter will be published on the NICE website and publicised on social media once the general election ‘purdah’ period restrictions end.
2. The Board approved the updated Charter for publication and dissemination.

ACTION: Jane Gizbert

1. Following a suggestion from a member of the audience, it was agreed that when published on the website the Charter should include hyperlinks to the NICE Principles and other important referenced documents.

ACTION: Jane Gizbert

# 19/107 AUDIT AND RISK COMMITTEE MINUTES

1. Dr Rima Makarem, chair of the Audit and Risk Committee, presented the unconfirmed minutes of the committee’s meeting held on 4 September 2019. Items of note include the first annual counter fraud submission to the Cabinet Office made in September, and the committee’s ongoing interest in cyber security.
2. The Board received the unconfirmed minutes.

# 19/108 BOARD CHAIR AND VICE CHAIR

1. The Board agreed the proposal to appoint Dr Rima Makarem to the role of interim Vice Chair for the period that Tim Irish is interim Chair. It was agreed that Dr Makarem would continue as Senior Independent Director and chair of the Audit and Risk Committee during this period, but this would be reviewed should she be required to cover for the interim Chair for a substantial period of time.

# 19/109 DIRECTOR’S REPORT FOR CONSIDERATION

1. Gill Leng presented the update from the Health and Social Care Directorate, and highlighted points of note including the endorsement statements that promote the implementation of NICE guidance, the positive response to the latest round of recruitment for Fellows and Scholars, and the review of the 23 grant-in-aid funded outputs produced by the medicines and technologies programme. Gill paid tribute to Professor Bee Wee who has stepped down from chairing a quality standards advisory committee due to other national commitments.
2. The Board noted the report and thanked Gill for the Directorate’s work. Progress updates on NICE’s engagement with the NHS England/Improvement regional offices were requested.

ACTION: Gill Leng

1. A member of the audience who was a lay member of a technology appraisal committee and also held other lay roles with national bodies praised NICE’s work on public and lay involvement.

# 19/110 – 19/113 DIRECTORS’ REPORTS FOR INFORMATION

1. The Board received the Directors’ Reports.

# 19/114 ANY OTHER BUSINESS

1. None.

# NEXT MEETING

1. The next public meeting of the Board will be held at 1.30pm on 29 January 2020 at the All Nations Centre, Cardiff, CF14 3NY.