

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

**Public Board Meeting held on 20 March 2019
at Lancaster Town Hall, Dalton Square, Lancaster LA1 1PJ**

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

Sir David Haslam	Chair
Professor Sheena Asthana	Non-Executive Director
Professor Angela Coulter	Non-Executive Director
Professor Martin Cowie	Non-Executive Director
Elaine Inglesby-Burke	Non-Executive Director
Professor Tim Irish	Vice Chair and Non-Executive Director
Dr Rima Makarem	Non-Executive Director
Tom Wright	Non-Executive Director

Executive Directors

Sir Andrew Dillon	Chief Executive
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
Catherine Wilkinson	Acting Business Planning and Resources Director

In attendance

David Coombs	Associate Director – Corporate Office (minutes)
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19/021 APOLOGIES FOR ABSENCE

1. Apologies were received from Ben Bennett.

19/022 DECLARATIONS OF INTEREST

2. Rima Makarem stated that she had recently been appointed as a lay member of the General Pharmaceutical Council and Martin Cowie declared his role as an adviser to BMJ Best Practice, both of which will be added to the register of interests.

ACTION: David Coombs

3. These, and the previously declared interests already recorded on the register were noted, and it was confirmed there were no conflicts of interest relevant to the meeting.

19/023 MINUTES OF THE LAST MEETING

4. The minutes of the public Board meeting held on 30 January 2019 were agreed as a correct record.

19/024 MATTERS ARISING

5. The Board reviewed the actions arising from the public Board meeting held on 30 January 2019 and noted that:
 - Alexia Tonnel will be undertaking training to become a mental health first aider.
 - Future impact reports will take account of the feedback from the Board's discussion.
 - The ABPI and ABHI are represented on the data analytics external reference group, and the next meeting, which Macmillan are attending to give a patient group perspective, will consider future representation from the data analytics industry.
 - Elaine Inglesby-Burke has been appointed to the Remuneration Committee.

19/025 CHIEF EXECUTIVE'S REPORT

6. Andrew Dillon presented his report, which described the main programme activities to the end of February 2019 and summarised the financial position at the end of January 2019. He highlighted the update from the Science Advice and Research programme, including the range of science policy and research collaborations on various methodological issues, and the actions underway to address the shortfall in income from NICE's Scientific Advice services.
7. Martin Cowie highlighted the extensive communication he has received from colleagues who are concerned about the draft abdominal aortic aneurysm guideline, which they feel diverges from internationally recognised best practice. Paul Chrisp stated that following NICE's quality assurance process and the feedback received from stakeholders, the committee were asked to look again at the recommendations, including to ensure the link between these and the evidence considered is clear. The committee subsequently held a further meeting and agreed to maintain the proposed recommendations. NICE is therefore working with system partners to look at the approach to implementing the guideline in the context of this feedback on the draft guideline. Andrew Dillon stated that the Senior Management Team will consider the outcome of these discussions and the proposed next steps, which may include escalation to the Board.

8. The Board received the report.

19/026 FINANCE AND WORKFORCE REPORT

9. Catherine Wilkinson presented the report which outlined the financial position at 31 January 2019 and gave an update on workforce developments. Year to date, there is a financial underspend of £1.3m. This is forecast to increase to £1.9m by the year-end, which is £0.1m higher than the underspend forecast in the report to the January Board meeting. Catherine highlighted the update on the HR initiatives in the report, including the work to bring recruitment back in-house and to maximise staff potential including new leadership and management apprenticeships for existing staff.
10. The Board received the report, and thanked Catherine Wilkinson for her contribution as acting Business Planning and Resources Director.

19/027 BUSINESS PLAN 2019/20

11. Andrew Dillon stated that the Board had been due to approve the 2019/20 business plan at this meeting. However, NICE was only recently informed by the Department of Health and Social Care (DHSC) that funding would not be provided to fully cover the increases in employer's pension contributions in 2019/20 and the cost of the second year of the Agenda for Change pay award. These create an unforeseen £1.1m cost pressure, in addition to the anticipated £1.6m deficit that is due to the timelag in realising income from the first year of introducing charging into the technology appraisal (TA) and highly specialised technologies (HST) programmes.
12. Andrew Dillon stated that it has therefore been necessary to withdraw the proposed business plan while options for addressing the £1.1m cost pressure are developed. It is hoped that proposals will be available for the Board in April, with a view to the Board approving a revised business plan in May. Andrew stated that he has set out his concerns to the DHSC about the timing for receiving this information, and to reconfirm expectations that the DHSC will provide funding to cover the shortfall in income in the first year of TA and HST charging, to the extent this is necessary.

19/028 NICE IMPACT REPORT: MENTAL HEALTH

13. Gill Leng presented the report on how NICE's guidance can contribute to improvements in mental health. Gill noted the positive commentary in the report from the Chief Executive of Mind and highlighted the range of NICE's guidance on mental health that dates back to NICE's first clinical guideline, which was on schizophrenia. Gill acknowledged the areas for further improvements identified in the report, which NICE will seek to feed into the work to deliver the NHS Long Term Plan.
14. The Board welcomed the report and discussed how it could be promoted and communicated to a range of audiences including service users and health care

professionals. The importance of tailored communication for particular audiences was noted, including targeting the wider medical profession given the poor physical health often experienced by people with mental illness. The multiple social media activities to promote previous impact reports were welcomed, and it was suggested that it would be helpful to evaluate which had been most effective.

ACTION: Jane Gizbert

15. The Board received the report.
16. In response to a question from the audience, Gill Leng confirmed that NICE has published guidance covering both acute and community mental health services, and this report is focused on areas where data on uptake is available.

19/029 NICE INDICATOR PROCESS GUIDE

17. Gill Leng presented the report that outlined the proposed updates to the process guide for developing NICE indicators. The most significant changes to the guide are to provide a more specific set of criteria to assess indicators, and a more flexible approach to indicator testing. Following Board approval, the updated guide will be sent out for a 12-week public consultation from mid-April 2019 to mid-July 2019. Gill paid tribute to Mark Minchin's contribution as the Associate Director responsible for the indicator programme.
18. Board members asked about the implications of the proposed changes for the Quality and Outcomes Framework (QOF), and also the extent data quality is included in the proposed indicator assessment criteria. In response, Gill Leng stated that the proposed changes will provide greater flexibility on the size of population to which an indicator will apply. The precise impact of the changes on the QOF will depend on the outcome of the contract negotiations between NHS England and the British Medical Association's General Practitioner Committee. NICE is not involved in these negotiations, nor in setting the target level for an indicator in the QOF. In relation to data quality, Mark Minchin highlighted this is inherent to all the proposed assessment criteria, and particularly relevant to the feasibility domain.
19. The Board noted and welcomed NICE's work on developing indicators to date, and approved the proposed updates to the process guide for public consultation.

ACTION: Gill Leng

19/030 LONDON OFFICE ACCOMMODATION

20. Andrew Dillon presented the update on the planning for when the lease on the current London office ends in December 2020. He highlighted that the British Council are moving to Stratford, east London, in the summer of that year and NHS Property Services are seeking to secure space in this new office that could be leased to NICE and other DHSC Arm's Length Bodies. Andrew highlighted the quality of the proposed accommodation and the transport links to the area. Subject to the Board's agreement to include NICE in these negotiations, he stated that an internal working group will begin to meet to consider how to utilise the

proposed space, and plan for the move, including working through the implications for staff.

21. The Board approved the proposed next steps including entering into negotiations to progress the proposed move to Stratford in the summer of 2020.

19/031 AUDIT AND RISK COMMITTEE MINUTES

22. Tim Irish presented the unconfirmed minutes of the Audit and Risk Committee meeting held on 23 January 2019, which he chaired on behalf of Rima Makarem. He noted that the committee reviewed the arrangements for introducing charging for the TA and HST programmes and were assured these arrangements were robust. Catherine Wilkinson paid tribute to the staff who have developed these arrangements, notably Nicola Bodey, Lori Farrar and Danielle Lees. She noted the positive response to date from the companies who have received an invitation to participate in the TA and HST programmes in April and May and are therefore be the first to be subject to the charging regime.
23. The Board received the unconfirmed minutes.

19/032 DIRECTOR'S REPORT FOR CONSIDERATION

24. Meindert Boysen presented the update from the Centre for Health Technology Evaluation (CHTE) and paid tribute to the staff across the Centre's work programmes. He highlighted the impact of multiple high profile policy initiatives on the Centre, including the NHS Long Term Plan, the Life Sciences Sector Deal, and the Voluntary Scheme for Branded Medicines Pricing and Access. While NICE is committed to delivering these, Meindert noted the need to ensure sufficient resources are in place and the timescales for implementation are appropriate.
25. Meindert highlighted the information in the report on the implementation of the budget impact test (BIT). Of the 31 topics that met the company evidence submission stage, nine have reached final guidance publication. Five of these have been recommended for routine commissioning, with the other four recommended for use in the cancer drugs fund (CDF). Only one of the topics that progressed to final guidance with a recommendation for routine commissioning was subject to a delay as a result of the BIT process. This was due to the need for a policy decision on whether the BIT applied to a topic going through the CDF review, and it did not affect patient access to the technology. Meindert highlighted the commitment to formally review the BIT next year.
26. The anticipated shortfall in published TA guidance against the business plan target was discussed, particularly in the context of the incoming charging regime. Meindert noted the range of factors that can affect the timescale for publishing TA guidance, and stated that work is underway to improve forecasting and scheduling, to ensure capacity is most effectively utilised. Catherine Wilkinson explained the charging arrangements and noted that the first payment is required at the start of the appraisal process.

27. The Board noted the report and thanked Meindert for the Centre's work.

19/033 – 19/036 DIRECTORS' REPORTS FOR INFORMATION

28. The Board received the Directors' Reports.

19/037 ANY OTHER BUSINESS

29. None.

NEXT MEETING

30. The next public meeting of the Board will be held at 1.30pm on 22 May 2019 at Poole Hospital, Longfleet Road, Poole, Dorset BH15 2JB.