

**NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE**

**Disability, dementia and frailty in later life - mid-life approaches to prevention**

**1st Meeting of the Public Health Advisory Committee D**

**Wednesday 6<sup>th</sup> November 2013**

**Red Rooms, NICE Offices, Manchester**

**Final Minutes**

<b>Attendees:</b>	<p><b><i>PHAC Members</i></b> John Britton, Paul Aveyard, Gary Bickerstaffe, Susan Biddle, David Croisdale – Appleby, Charlie Foster, Janet Henson, Janet Henson (WEA), Robin Ireland, Jane Landon, Jane Leaman, Louise Lafortune (10.04), Susie Morrow, Gillian Orrow, Mark Strong, Dagmar Zeuner (10.09).</p> <p><b><i>NICE Team</i></b> Catherine Swann, Hilary Chatterton, Emily Aidoo, Hugo Crombie, Alastair Fischer, Claire McLeod.</p> <p><b><i>Review Team</i></b> Louise Lafortune (Public Health, Cambridge). Pieter van Baal (Erasmus University, Rotterdam).</p> <p><b><i>Experts</i></b> Oliver Mytton.</p> <p><b><i>Observers</i></b> Jessica Fielding (NICE), Sarah Gage (NICE), Jane Greenstock (SCIE), Karen Grimsrud (Public Health agency of Canada), Deborah Rutter (SCIE), Jane Silvester (NICE), Emma Stonier (NICE).</p>
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<b>Version</b>	1.0
<b>Audience</b>	<b>PHAC members, NICE team, members of the public</b>

Item		Action
<p><b>1. Welcome and objectives for the meeting</b></p>	<p>The Chair welcomed members of the Public Health Advisory Committee (PHAC) to the 1st meeting on Disability, dementia and frailty in later life - mid-life approaches to prevention</p> <p>The Chair welcomed the members of the review team and economics contractor, the observers and the experts to the meeting. He also welcomed the members of public to the meeting.</p> <p>All present introduced themselves.</p> <p>The Chair outlined the general housekeeping for the venue which included noting all fire exits.</p> <p>The Chair outlined the objectives of the meeting which included:</p> <ul style="list-style-type: none"> <li>• Discussing a presentation of work by the UK Health Forum on the correlates of dementia</li> <li>• Discussing a presentation from the NICE collaborating centre undertaking the evidence reviews to inform this guidance</li> <li>• Discussing a presentation from the NICE collaborating centre undertaking the economic analysis to support this guidance</li> <li>• Considering related NICE guidance, and potential links with this guidance</li> <li>• Discussing potential gaps in the evidence, and identifying areas where expert testimony may be helpful</li> </ul> <p>The Chair informed the PHAC that no apologies had been received.</p>	
<p><b>2. Declarations of Interests</b></p>	<p>The Chair explained that verbal declarations of interest are a standing item on every agenda and are recorded in the minutes as a matter of public record. The Chair asked everyone to verbally declare the interests they had made in writing at the time of their application to join the PHAC and also to declare any additional interests that may have arisen since then.</p> <p>The potential conflicts of interest declared were as follows:</p> <p><b><u>Personal pecuniary interest</u></b>  <b>David Croisdale - Appleby</b></p>	

	<p>Salary as Chair of Skills for Care</p> <p><b>Gillian Orrow</b> Partner in a GP practice that participates in QOF and national enhanced services</p> <p><b>Paul Aveyard</b> Has done a randomised trial on smoking cessation for McNeil and do occasional consultancy for manufacturers of smoking cessation medication- about once per year. In the last five years this has been for McNeil and Pfizer. Also does other bits of paid work for outside agencies. Sometimes the payments go to him personally.</p> <p><b>Susie Morrow</b> Currently providing consultancy in research development to St Mary's University College, Twickenham. Involvement with NICE PHAC D could increase future prospects of paid work.</p> <p><b><u>Personal family interest</u></b> <b>Charlie Foster</b> Line manages Dr Paul Kelly (son of Prof Mike Kelly, CPH Centre Director) at the Physical Activity Research Group at University of Oxford.</p> <p><b>Dagmar Zeuner</b> Partner is owner of ZG publishing and editor of H2Open (open water swimming magazine).</p> <p><b>Susie Morrow</b> Partner (Dr Mike Grahn) is director of technology of Enteric, a National Institute of Health Research-funded healthcare technology cooperative working in the field of bowel function. See <a href="http://www.enteric.org.uk/">http://www.enteric.org.uk/</a></p> <p>He also acts as a consultant to the UK Technology Strategy Board and is an (unpaid) member of the executive of Wandsworth Healthwatch.</p> <p><b><u>Non personal pecuniary interest</u></b> <b>Paul Aveyard</b> Has done one randomised trial on smoking cessation for McNeil and does occasional consultancy for manufacturers of smoking cessation medication- about once per year. In the last five years this has been for McNeil and Pfizer. Also does other bits of paid work for outside agencies. Sometimes the payments go to his university employer.</p> <p><b>Louise Lafortune</b> LL is also on the PHAC committee. The Chair and the AD agreed that they would manage this by having LL</p>	
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	<p>lead the team but not actually writing the analysis / synthesis of the evidence  LL will take full part in the committee when discussing the economic analysis and other evidence (e.g. UK health forum reviews) and will comment on draft recommendations, and can advise the PHAC on how to interpret her teams' reviews, but won't help draft recommendations based on her teams' evidence.</p> <p><b><u>Personal non pecuniary interest</u></b>  <b>Dagmar Zeuner</b>  As director of Public Health is a current and future commissioner of public health services/programmes.</p> <p><b>Gillian Orrow</b>  Has published research on the effectiveness of physical activity promotion in primary care (<b>Orrow G, Kinmonth AL, Sanderson S, Sutton S. Physical Activity Promotion based in Primary Care: A Systematic Review and Meta-Analysis of Randomised Controlled Trials. <i>BMJ</i> 2012;344:e1389</b>)</p> <p><b>John Britton</b>  Is a member of the board of Action on Smoking and Health, and also chairs the tobacco advisory group of the Royal College of Physicians.</p> <p><b>Paul Aveyard</b>  Is a member of UKSBM, ASO, CRUK Tobacco Advisory Group, ASH, BMA, SSM, SRNT.</p> <p><b>Robin Ireland</b>  Chief Executive of the health equalities group. Director of HM partnerships community interest company.</p> <p><b>Susie Morrow</b>  Until July 2012, Vice Chair of Living Streets; remains active in London-wide &amp; local Living Streets campaigning and currently chair of Wandsworth Living Streets group.  London Cycling Campaign activist  Member of the National Trust, Railfuture, Roadpeace, Wandsworth Society, Wandsworth Friends of the Earth, Battersea Society &amp; Wandsworth Environment Forum steering group.  Member of 20splentyforus e-group and Wandsworth 20splentyforus representative.  Shareholder in GO-OP Cooperative Limited – the public transport co-operative.</p> <p>There were no further additional conflicts of interest.</p> <p>The Chair and the Associate Director noted that the interests declared did not prevent the attendees at</p>	
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	committee from fully participating in the meeting	
<b>3. Introduction from Catherine Swann NICE Associate Director</b>	<p>Catherine Swann (CS) gave a presentation entitled <b>Delaying disability, dementia and frailty-developing NICE public health guidance.</b></p> <p>The PHAC were invited to ask questions after Hilary Chatterton's presentation.</p>	
<b>4. Presentation by Hilary Chatterton NICE Lead Analyst</b>	<p>Hilary Chatterton (HC) gave a presentation entitled <b>Introduction to the scope, logic model and review question matrix.</b></p> <p>The PHAC were invited to ask HC questions in regard to the presentation.</p> <p>A number of issues were discussed. These included: preferred terminology for use in the guidance, the range of interventions (both up and downstream) to be included in the evidence reviews, the need for the guidance to be suitable for use within the new public health structure, health inequalities, and how best to add to what is already known and is the focus of current NICE guidance.</p>	
<b>5. Presentation by Louise Lafortune MRC Public Health, Cambridge</b>	<p>Louise Lafortune (LL) gave a presentation entitled <b>Introduction to the review centre and outline of the evidence reviews.</b></p> <p>LL leads the review team at NICE's collaborating centre on this guidance.</p> <p>LL is also on the PHAC committee. The Chair explained how this dual role would be managed during meetings and in the drafting of the guidance.</p> <p>The PHAC were invited to ask LL questions about the work to be undertaken.</p> <p>A number of issues were discussed, including: The breadth of the strategies used to search for relevant literature.</p> <p>Action: PHAC members were invited to submit any key studies they were aware of for consideration for inclusion in the evidence reviews.</p>	
<b>6. Presentation by Oliver Mytton UK Health Forum</b>	<p>Oliver Mytton (OM) gave a presentation entitled <b>Delaying dementia – evidence from observational studies.</b></p> <p>The PHAC were invited to ask OM questions in regard to the presentation.</p> <p>A number of issues were discussed, these included:</p>	

	<p>Whether there is evidence for a number of potential risk factors not covered by the presentation. The distinction between identifying risk factors and treatment effect and the length of potential causal pathways.</p>	
<p><b>7. Presentation by Alastair Fischer. NICE</b></p>	<p>Alastair Fischer (AF) gave a presentation entitled <b>Economic analysis and public health guidance.</b></p> <p>AF had no interests to declare.</p> <p>The PHAC were invited to ask AF questions in regard to the presentation.</p> <p>A number of issues were discussed, including the potential impact of the changes in the modelling methods on cost effectiveness compared to the standard NICE modelling approach.</p> <p><b>Action: The PHAC to forward any key studies that may be relevant from other countries</b></p>	<p><b>PHAC</b></p>
<p><b>8. Presentation by Pieter van Baal Erasmus University, Rotterdam</b></p>	<p>Pieter van Baal (PvB) gave a presentation entitled <b>Introduction to economic modelling.</b></p> <p>PvB had no interests to declare.</p> <p>The PHAC were invited to ask PvB questions in regard to the presentation.</p> <p>A number of issues were discussed. These included: The intervention to be modelled, QALY thresholds and the need for other economic outcomes and endpoints, PvB thinks that this model may already take these factors into account through levels of disability etc.</p> <p><b>Action: NICE will work with PvB to look at the costs for individual/ state for social care.</b></p>	<p><b>NICE Team</b></p>
<p><b>9. Overview of current NICE guidance Hilary Chatterton, NICE</b></p>	<p>HC gave briefly presented a document summarising existing NICE guidance that includes the people who are the focus of the current work. This document will act as a resource later in the guidance development process.</p> <p>The PHAC were invited to ask HC questions in regard to the presentation.</p>	
<p><b>10. Expert testimony Hilary Chatterton, NICE</b></p>	<p>HC outlined the ways in which expert testimony is used in guidance development, including The role of expert witnesses Potential gaps in the evidence and</p>	
<p><b>11. Potential gaps in the evidence</b></p>	<p>The PHAC discussed the potential gaps in evidence and were given the opportunity to ask questions.</p> <p>Two potential areas have been identified from the</p>	

	<p>Stakeholder comments on the draft scope. These are prevention evidence for visual and hearing loss. The PHAC might want to consider if NICE should approach any experts and institutions for information. The PHAC members were asked to inform NICE about any studies in progress and any innovative work covered by the scope of the guidance of which they are aware.</p> <p><b>Action: CS to forward the presentations, and links to the scope consultation responses and to the behaviour change research and draft guidance.</b></p> <p>A list of suggested experts will be included in the mail out for future meetings as appropriate.</p>	<p><b>NICE Team</b></p>
<p><b>11. Summary of the day and any Other Business/Next steps</b></p>	<p>The Chair summarised the items that had been discussed throughout the day. These included preferred terminology for use in the guidance, the scope of the evidence reviews, factors associated with developing dementia, the economic modelling, and the need to identify potential expert witnesses to address any gaps in evidence.</p> <p>The Chair informed the group of the next steps.</p> <p>There was no other business.</p>	
<p><b>12. Close</b></p>	<p>The meeting closed at 2.56pm.</p>	