



Healthcare
Improvement
Scotland

SHTG
Advice on health
technologies

The Scottish Health Technologies Group (SHTG) Standing Orders

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Introduction

These standing orders describe the operational and governance arrangements for managing the work of the Scottish Health Technologies Group (SHTG). This includes the SHTG Executive Team, the Scottish Health Technologies Group Council and the Evidence Review Team (ERT).

The SHTG Executive Team may seek to convene other groups to facilitate the work of SHTG. Terms of reference will be developed separately for each group.

1. SHTG

1.1 Function

The function of SHTG is to fulfil the Healthcare Improvement Scotland (HIS) statutory responsibility under The Public Services Reform (Scotland) Act 2010 10C (1) (d) '*... provision of advice to the health service on the clinical and cost effectiveness of new and existing health technologies including drugs*'.

This responsibility exists owing to:

- The widespread use of health technologies that have potential for health benefit but also harm across health and social care settings.
- A substantial spend on health technology use within NHS Scotland / Health and social care and the need to make best use of limited resources.
- The need to support value-based decision making on the use of health technologies.

HIS' statutory responsibility is delegated to the two health technologies groups; the Scottish Medicines Consortium (SMC) and SHTG.

1.2 Role

SHTG is a national health technology assessment (HTA) agency providing advice to NHSScotland on the use of new and existing health technologies that are likely to have significant implications for people's care in Scotland.

SHTG's vision is for all our work to contribute to the provision of better health and social care for everyone in Scotland. To help achieve this vision, SHTG offers a range of HTA 'products', from bespoke assessments to national recommendations for Scotland.

SHTG's approach is built around the following key principles: independent review and sharing of knowledge; making the best use of our team's expertise; being receptive to the needs of stakeholders; and putting collaboration at the heart of our approach.

SHTG acknowledges that evidence and advice constitutes only one of the sources needed for decision-making and planning in NHSScotland. For example, SHTG advice does not override the individual responsibility of health professionals to apply clinical judgement according to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

1.3 Governance

SHTG operates within the Evidence Directorate of HIS. The work of SHTG is governed by the SHTG Executive Team, reporting to the Quality and Performance Committee, a committee of the HIS Board.

SHTG is connected to the wider work of HIS through representation on the standing groups and committees of HIS. Significant risks or issues are escalated to the HIS Executive Team or Board by the Director of Evidence.

1.4 Operations

The SHTG Team is formed from staff employed by HIS within the Evidence Directorate. It includes staff from different disciplines and teams and comprises:

- Unit Head
- Programme Manager
- Senior Project Officers (x2)
- Project Officer
- Administration support

SHTG's work is supported by the HIS Evidence Research and Information Service (RIS), including:

- Health Service Researchers
- Health Economists
- Information Scientists

HIS Evidence maintains a central register of all interests declared for SHTG and related committees and groups in accordance with the HIS Evidence code of practice on declaration of interests.

1.5 Activities

SHTG will:

1. Develop and publish advice on health technologies that is reliable, high quality and relevant.
2. Provide a range of products that will contribute to robust decision-making at national or local level based on the best available evidence for Scotland
3. Support the establishment and improvement of mechanisms within health policy and clinical practice to consider advice on health technologies.
4. Maintain clear communication channels and processes for industry, academia and healthcare professionals to contribute and be aware of HTA activities.
5. Engage patients, their formal and informal carers and patient organisations in contributing to HTA processes.
6. Participate in local, regional and global HTA activities.

2. SHTG Executive Team Terms of Reference

2.1 Purpose

The purpose of the SHTG Executive Team is to provide effective strategic direction and leadership to develop SHTG and ensure that it is delivering the statutory responsibility described above.

2.2 Governance

The work of SHTG will be reported via the HIS Quality and Performance Committee and HIS Board, as required.

2.3 Responsibilities

The SHTG Executive Team:

- Ensures that SHTG delivers the appropriate part of the HIS statutory duty to provide advice to NHSScotland on the clinical and cost effectiveness of new and existing health technologies, excluding medicines.
- Ensures the activities of SHTG align with the HIS corporate vision and related Scottish Government policy and priorities.
- Ensures that the outputs of SHTG remain relevant and timely through the provision of a range of evidence support and advice products.
- Monitors progress and focus of the SHTG work programme.
- Oversees the Scottish Health Technologies Council and ERT
- Addresses any challenge to SHTG processes or advice.
- Oversees recruitment to key SHTG positions, for example the Council Chair and Unit Head.

2.4 Membership

Membership of the SHTG Executive Team consists of:

1. SHTG Unit Head (see role description below)
2. HIS Director of Evidence
3. Scottish Health Technologies Council Chair (see role description below)
4. HIS Evidence Lead Health Services Researcher(s)
5. SHTG Programme Manager

SHTG Unit Head

The Unit Head is accountable to the Director of Evidence and is responsible for:

- The direction, conduct, progress and completion of SHTG business
- Chairing the SHTG Executive Team
- Chairing of the Evidence Review Team (ERT)
- Delivery of the SHTG work programme within available staff and financial resources.
- Financial responsibility and accountability for the SHTG budget.

- Development of, and adherence to, HTA methodologies in line with current best practice and new developments, as outlined in the suite of SHTG standard operating procedures.
- Working to ensure SHTG remains relevant to the needs of key stakeholders, and ensuring appropriate clinical, patient and other relevant engagement in SHTG activities.
- Development and implementation of quality assurance mechanisms.
- Identification of the appropriate staff mix.
- Linking with the Lead Health Services Researchers, Senior Information Scientist and Health Economics Leads to ensure that sufficient staff resources are available to undertake the SHTG work programme.

The Chair of the Scottish Health Technologies Council

The Council Chair is appointed by HIS. The Chair is appointed for a standard period of three years. There is an opportunity for a second term if agreed via vote of Council; ratified by Director of Evidence, HIS CEO and HIS Chair; HIS Quality and Performance Committee to be notified of the decision. A third term would only be available by exception. The Chair must declare any potential conflict of interest prior to, and during, their appointment.

The role of the Chair is described in Appendix 1. A commitment to an average of two sessions per week is required. The appointment is made following the procedure set out in Appendix 1 to this document.

The Council Chair is accountable for the direction, conduct, progress and completion of the Council business, both during meetings and between the meetings. In this task, the Chair is supported by the SHTG Executive Team and ERT. The Council Chair is accountable to the Director of Evidence and professional leadership is provided by the Medical Director of HIS.

The Chair must declare any potential conflict of interest prior to, and during, their appointment.

The Chair leads and directs the Council, encouraging all members to make a full contribution to discussions and ensuring that all appropriate matters are addressed in a timely manner. The Chair ensures that declaration of interests forms from all Council members are scrutinised and any issue of concern discussed with the individual concerned and/or the SHTG Executive Team, with appropriate actions taken.

The ruling of the Chair is final on all matters within their function as Chair.

2.5 Meetings

Frequency

The SHTG Executive Team meets every two months. Extraordinary meetings may be convened at more frequent intervals to address urgent items of business. Details of the format and / or location of meetings are provided.

Agenda

The SHTG Executive Team Chair determines which items appear on the agenda. SHTG Executive Team members may also submit items for consideration by notifying the Chair.

The agenda and papers are circulated to SHTG Executive Team members at least 5 working days in advance of meetings. The order of business normally follows the agenda but is finally determined by the Chair of the SHTG Executive Team.

Conduct of meetings

The SHTG Unit Head chairs meetings of the SHTG Executive Team. In the absence of the Unit Head, members in attendance decide who will chair the meeting.

Minutes

An action note from the meeting is drawn up by SHTG Programme Manager.

3. Scottish Health Technologies Group Council Terms of Reference

3.1 Purpose

The purpose of the Scottish Health Technologies Group Council (hereafter referred to as 'The Council') is to support SHTG in providing advice on health technologies, through members contributing their health and care expertise and experience. The SHTG Executive Team greatly values the contribution of members who serve on the Council. Their service and commitment, along with the expertise and knowledge they bring, contributes directly to improving outcomes for patients in NHSScotland.

The Council is responsible for making recommendations to NHSScotland on the use of new and existing health technologies likely to have significant implications for people's care in Scotland.

3.2 Governance

- The Council is responsible for agreeing recommendations contained within the 'SHTG Recommendation' products
- The Council Chair is accountable to the HIS Board on behalf of the Council for all recommendations made by the Council.
- The Council is informed by SHTG Executive Team on the strategic direction for SHTG's work.
- HIS reserves the right to delay or refuse publication of any outputs if there are concerns about the quality or validity of the findings.
- Clinical governance and assurance to the HIS Board for activities of the Council is through the Quality and Performance Committee.
- Significant risks or issues are escalated to the HIS Executive Team or HIS Board by the Director of Evidence.
- In circumstances where urgent decisions are required and it is impractical to convene an extraordinary meeting of the Council, the SHTG Executive Group will ensure that the Council is informed.
- Legal indemnity: All recommendations from the Council are covered by the Clinical Negligence and Others Indemnity Scheme (CNORIS).

3.3 Responsibilities

Collective Responsibilities of the Council

- Review draft recommendations presented to the Council, including associated comments (from consultation or peer-review) and, after discussion, agree wording of recommendations. Recommendations are based on the range of evidence presented

to the Council, other cogent factors of relevance to NHSScotland as well as members' knowledge and experience of the Scottish context.

- Provide comment on the strategic direction for SHTG's work.
- Should inform the secretariat of new evidence that is likely to materially change previously published 'advice' on a topic that is still of current interest within NHSScotland.
- Provide a forum for sharing information about SHTG advice development, dissemination, implementation and related activities.
- Maintain an awareness of developments in the field of HTA taking place nationally and internationally and consider their applicability within Scotland
- Act collectively in accepting and agreeing the business of meetings.
- Legal indemnity: All recommendations from the Scottish Health Technologies Council are covered by the Clinical Negligence and Others Indemnity Scheme (CNORIS).

Responsibilities of individual members of the Council

- Make a full commitment to support the function and work of SHTG.
- Attend all meetings of the Council or arrange for a deputy to attend.
- Read all meeting papers in advance of the meetings.
- Agree to lead discussion on specific topics and pieces of work, as requested by the Chair of the Council.
- Participate in and contribute to working groups/subgroups, where requested by the Chair of the Council..
- Use professional expertise and networks to highlight health technologies of relevance for consideration by SHTG.
- Raise awareness of SHTG and its role and remit, facilitating engagement with their constituent geographical and professional networks and clinical communities.
- Adhere to the HIS organisational values and behaviours: care and compassion; dignity and respect; quality and teamwork; and openness, honesty and responsibility.
- Make a full declaration of interests on appointment, and annually thereafter, in accordance with the HIS Evidence code of practice on declaration of interests. If a member is uncertain as to whether or not an interest should be declared, they must seek guidance from the Chair. All Council members are required to declare relevant interests at meetings, whether or not those interests have previously been declared to SHTG. Declarations of interest may be published online.

3.4 Membership

Members

Membership of the Council comprises representatives of the following groups and organisations:

1. Board Chief Executives
2. Directors of Finance
3. Public Health Scotland
4. Healthcare Improvement Scotland Public Partners
5. NHS National Services Scotland - Specialist Commissioning and National Planning
6. Scottish Association of Medical Directors
7. Association of British Healthcare Industries
8. Individuals working in Scotland with specific expertise in HTA with a research focus
9. Individuals working in Scotland with specific expertise in HTA with an economics

focus

10. Scottish Government Health Directorate

11. SHTG Executive Team

Members are appointed on the basis of their experience and expertise and as representatives of their professional networks, including lay representatives. For representatives of an organisation, we would anticipate consulting with your network where appropriate but are not expecting full consultation within the organisation on all papers. (For HIS Public Partners, the role of the Public Partner is provided in Appendix 3).

The membership of the Council is made public via the [SHTG website](#).

Members of the Council are appointed by HIS, in consultation with the SHTG Executive Team, for a period of 3 years. This may be renewed on the recommendation of the SHTG Executive Team and with the agreement of the member.

Additional representatives may be appointed as members of the Council at the discretion of the SHTG Executive Team.

In attendance

SHTG Team members and other NHS staff are invited to attend meetings to address specific items of business or may wish to attend as observers.

Organisations not already represented on SHTG Committee with a relevant interest in the work of SHTG may be invited to attend and participate in the meetings with the agreement of the Chair.

Technology-specific experts (e.g. clinical experts, patient organisations) will routinely be invited to attend Council meetings to provide evidence for Council members' consideration.

Those in attendance may contribute to the discussion during the meeting, but are not permitted to participate in developing the recommendations – which is the responsibility of Council members.

Observers

Meetings of the Council have been open to the public since 2016. This supports our commitment to openness and transparency. We hope that it helps people to understand the way in which we consider evidence before issuing advice.

Observers are not permitted to contribute to discussion, or contribute to the development of recommendations.

3.5 Meetings

Frequency of meetings

The Council normally meets every two months and meetings may last up to four hours. Details of meeting format and / or location is provided in advance of the meeting.

An annual schedule of meetings for the following calendar year is produced. Development sessions are scheduled for members as agreed by SHTG Executive Team.

The Chair may convene extraordinary meetings of the Council, if required.

Agenda

The SHTG Executive Team determines which items appear on the Council meeting agenda.

Members of the Council may submit items for consideration. Any member wishing to have an item considered for an agenda should notify the SHTG Team at as early a date as possible.

The agenda and papers are circulated to members at least five working days in advance of meetings. The order of business is determined by the Chair.

Tabled papers may be accepted with the express agreement of the Chair and only in exceptional circumstances.

No other business is discussed at the meeting, unless permitted by the Chair.

Conduct of meetings

Meetings are conducted by the Chair.

The Chair must ensure that all members of the Council feel able to contribute fully to the advice formulation processes. The Chair leads and directs meetings, encouraging all members to make a full contribution to discussions and ensuring that all appropriate matters are addressed in a timely manner.

Timekeeping

The agenda is timed with the discretion of the chair to be flexible to ensure appropriate discussion and decision-making. Rarely, un-concluded items are carried forward to next meeting or concluded in writing.

Attendance and Format

Members are expected to attend all meetings. The substitution of a deputy is acceptable on the understanding that the deputy will be able to contribute to the discussion and provide a report on the meeting to the substantive member. Members submitting apologies for meetings, and who are unable to send a deputy, are expected to notify the SHTG Team in advance.

All reasonable facilities are provided for members to ensure they can participate fully and equitably in the business of the Council.

If a member does not attend or send a deputy for three consecutive meetings, the Chair will consider whether they should continue as a member.

Interpretation

During the meeting, the Chair of the Council has overall responsibility for the interpretation of standing orders, on which they may be advised by the SHTG Executive Team.

Statements made by members during the meeting should be relevant to the matter under discussion.

Collective Decision-Making

All members act collectively in accepting and agreeing the business of meetings and ensure the discussions and conclusions remain confidential until publication of the recommendations.

Decisions are taken by reaching consensus among the majority present through discussion. A member shall have the right for their dissent to be recorded.

Quorum

Council meetings are considered quorate with an attendance of 50% plus one member.

At the Chair's discretion, meetings which are not quorate may continue if those members who are not present are consulted after the meeting and agree with the decisions reached.

Minutes

A minute of the meeting is drawn up by the SHTG Team on behalf of the SHTG Executive Team to provide a record of business. The names of those members present are recorded in the minute. Approval of minutes, incorporating any necessary amendments, is obtained at the next meeting. Once approved, the minute is published on the SHTG website.

Declaration of interests

All Council members are required to declare relevant interests at meetings, whether or not those interests have previously been declared to SHTG. If an issue arises for discussion and a member is concerned about a matter which could be regarded as affecting their impartiality and this matter has not already been declared, they must raise this with the Chair in advance of the meeting if possible.

The Chair must also ensure that at the beginning of each meeting members are asked to declare any additional recently acquired interests, and implement the HIS Evidence policy on handling declarations of interest.

Confidentiality

SHTG requests that confidentiality is observed in respect of all information shared in relation to SHTG business and that steps are taken to ensure it is not breached.

4. Evidence Review Team Terms of Reference

4.1 Purpose

The purpose of the SHTG Evidence Review Team (ERT) is to support the work of SHTG by providing a high quality evidence review function and, where appropriate, drafting evidence-based recommendations for subsequent Council consideration.

4.2 Governance

- The ERT is responsible for supporting the work of the Council.
- The ERT is accountable to the Chair of the SHTG Executive Team on behalf of HIS.

- The ERT provides an internal quality assurance mechanism for the evidence which supports recommendations by the Council.
- The SHTG team provides specialist skills and project management resources to the group.

4.3 Responsibilities

Collective Responsibilities of the ERT

- Review the evidence contained within draft SHTG products and any peer review comments and ensure that the key findings and conclusions are consistent with the evidence available.
- Draft recommendations for subsequent consultation with stakeholders and consideration by the Council.
- Act collectively in accepting and agreeing the business of meetings.
- Undertake any other tasks required by the SHTG Executive Team.

Responsibilities of Individual ERT members

- Make a full commitment to ERT and the tasks required to achieve the aims set out in the terms of reference.
- Attend all meetings of ERT or arrange (where appropriate) for a deputy to attend in their place.
- Read all meeting papers in advance of the meetings.
- Agree to lead on specific topics and pieces of work, as requested by the ERT Chair.
- Participate in and contribute to subgroups/ad hoc groups as required.
- Make a full declaration of interests on appointment, and annually thereafter, in accordance with the SHTG code of practice on declaration of interests. If a member is uncertain as to whether an interest should be declared, they must seek guidance from the Chair. It is a member's responsibility to update their Declarations of Interest as required.

4.4 Membership

Membership of ERT comprises representatives from:

- Health Economics and Health Technology Assessment Research Group, University of Glasgow, or
- Health Services Research Unit, University of Aberdeen
- Public Health Scotland
- HIS Evidence Directorate
- Scottish Health Technologies Council Chair
- 2 x Healthcare Improvement Scotland Public Partners
- SHTG/RIS Team. All invited to intend, but substantive membership from:
 - Public Involvement Advisor
 - SHTG Programme Manager
 - Lead Health Service Researchers
 - Senior Health Economist

Members of ERT are appointed by the SHTG Executive Team. This is not a formal membership and tenure of membership can be changed at any time at the discretion of SHTG Executive Team.

4.5 Meetings

Frequency of meetings

ERT normally meets every two months for up to three hours. An annual schedule of meetings for the following calendar year is produced by SHTG Team.

The Chair may convene extraordinary meetings of the ERT, if required.

Members of the ERT are encouraged to attend one meeting of the Council per year to help maintain links between the groups and ensure an understanding of the processes involved behind developing recommendations.

Agenda

The ERT Chair determines which items appear on the ERT meeting agenda.

ERT members may submit items for consideration. Any member wishing to have an item considered for an agenda should notify the SHTG Team at as early a date as possible.

The agenda and papers are circulated to ERT members at least five working days in advance of meetings. The order of business normally follows the agenda but is determined by the Chair. Tabled papers may be accepted with the express agreement of the Chair and only in exceptional circumstances. No other business is discussed at the meeting, unless permitted by the Chair.

Conduct of meetings

Meetings are conducted by the ERT Chair.

The Chair leads and directs ERT, encouraging all members to make a full contribution to discussions and ensuring that all appropriate matters are addressed in a timely manner. All members of ERT are expected to adhere to the HIS organisational values and behaviours: care and compassion; dignity and respect; quality and teamwork; and openness, honesty and responsibility.

Timekeeping

Unconcluded items are carried forward to next meeting or concluded electronically.

Attendance and Format

Members are expected to attend all meetings. The substitution of a deputy is acceptable on the understanding that the deputy will be able to contribute to the discussion and provide a report on the meeting to the substantive member. Members submitting apologies for meetings, and who are unable to send a deputy, are expected to notify the secretariat in advance.

All reasonable facilities are provided for members to ensure they can participate fully and equitably.

Collective responsibility

All members act collectively in accepting and agreeing the business of meetings and ensure the discussions and conclusions remain confidential until the publication of the minutes and outputs.

All members bring topics to the table and stand by the agreement in the meeting unless a formal objection is placed at the time.

Decision-making

The decisions of ERT are usually arrived at by a consensus of those members present.

Minutes

A brief action note from the meeting is drawn up by the SHTG Team, on behalf of the ERT Chair and kept on record. No formal minutes are kept.

Declaration of interests

All ERT members are required to declare relevant interests at meetings, whether or not those interests have previously been declared to SHTG. If an issue arises for discussion and a member is concerned about a matter which could be regarded as affecting his/her impartiality and this matter has not already been declared, s/he must raise this with the Chair in advance of the meeting if possible.

The Chair ensures that at the beginning of each meeting members are asked to declare any additional recently acquired interests, and is expected to exercise judgement in the conduct of SHTG business in the event of any potential conflicts of interest. Declarations of interest may be published online.

Confidentiality

SHTG requests that confidentiality is observed in respect of all information shared in relation to SHTG business and that steps are taken to ensure it is not breached.

5. Review of Standing Orders

These shall be submitted to SHTG Executive Team, from time to time, with a note of any new standing order or alteration of any existing standing order which may be required for the better conduct of the business of the SHTG.

Revisions to standing orders will be made available to the Scottish Health Technologies Council for comment, before approval by HIS Quality and Performance Committee.

Appendix 1. Role of the Chair of the Scottish Health Technologies Council

This is a senior health professional role providing essential leadership to the Scottish Health Technologies Group (SHTG) and therefore NHSScotland, and advises on the managed introduction of health technologies.

Required commitment, equivalent to 0.2 WTE, to cover the following:

- Lead role in developing the strategic direction of SHTG and oversight of its work programme through participation in the work of the SHTG Executive Team and interactions with other relevant stakeholders.
- Chairing and leadership of meetings of the Scottish Health Technologies Council ('the Council') to reach robust recommendations. This includes preparation and background reading, liaison with the SHTG Executive Team, the Evidence Review Team (ERT) and SHTG Team. It also includes identifying appropriate council members to 'introduce' topics and final approval and accountability for the Council's recommendations. Meetings take place up to six times per year.
- Attendance at the HIS Performance & Quality Committee – through which governance and internal alignment is provided to SHTG.
- Regular communication with representatives of the Scottish Government Health and Social Care Directorates, NHS boards and HIS to discuss topics of mutual relevance.
- Attendance at ERT meetings to support lead authors of the SHTG Team in developing evidence reviews and to ensure clarity of understanding and fully informed recommendation-making by the Council.
- Undertaking meetings with referrers following publication of SHTG Recommendation if needed.
- Advising on ad-hoc pre-submission queries concerning individual products including meeting with requestors / manufacturers as required.
- Frequent (weekly) liaison with the SHTG Team on matters of policy and operational issues, including prompt responses to e-mail communications.
- Participation in meetings nationally and internationally on behalf of the SHTG with bodies involved in health technology assessment and regulation and to present on the work of the SHTG as required.
- Assistance in responding to media enquiries and interest in the work of SHTG, including possible direct representation of SHTG to broadcast and print media.
- Participation in monthly meetings of the SHTG Executive Team
- Contribution to reports and evaluations of the work of the SHTG and relevant publications.

Person specification

The post holder must hold a substantive NHS post and be able to demonstrate the following key competencies and skills:

- A strong personal commitment to the principles of technology appraisal and the ability to translate this into an effective vision for SHTG.
- An understanding of, and interest in, the use of an evidence-based approach to the development of advice for NHSScotland.
- The ability to effectively chair a large and complex multidisciplinary group.
- The ability to lead, influence, motivate and negotiate.
- Ability to clarify and summarise complex subjects for a multi-professional group
- Knowledge of structures and functions of NHSScotland and the Scottish Government.
- Professional credibility within their specialist field.
- Strong communication skills.

The post holders must declare any potential conflict of interest prior to, and during, appointment.

Appendix 2. Role of the Vice Chair of the Scottish Health Technologies Council

This is an opportunity for a senior healthcare professional to help lead, develop and support implementation of the work of the Scottish Health Technologies Group (SHTG) in the evaluation and managed introduction of health technologies.

Required commitment, equivalent to 0.2 WTE, to cover the following:

- Contributing to the strategic direction of SHTG and oversight of its work programme through participation in the work of the SHTG Executive Team and interactions with other relevant stakeholders.
- Acting as a Vice-Chair of the Council supporting the Chair to reach robust recommendations and deputise where required. This includes preparation and background reading, liaison with the SHTG Executive Team, the Evidence Review Team (ERT) and SHTG Team. It also includes identifying appropriate council members to 'introduce' topics and final editing of the Council's recommendations.
- Co-chairing of the Medtech Forum to facilitate engagement with manufacturers and industry stakeholders.
- Lead role in interactions with stakeholder groups in Scotland including clinicians and patient organisations
- Attendance at ERT (bi-monthly meeting, or more frequent) to support lead authors of the SHTG Team in developing evidence reviews and to ensure clarity of understanding and fully informed recommendation-making by SHTC.
- Advising on ad-hoc pre-submission queries concerning individual products including meeting with requestors / manufacturers as required.
- Frequent (weekly) liaison with the SHTG Team on matters of policy and operational issues, including prompt responses to e-mail communications.
- Participation in meetings nationally and internationally on behalf of the SHTG with bodies involved in health technology assessment and regulation and to present on the work of the SHTG as required.
- Assistance in responding to media enquiries and interest in the work of SHTG, including possible direct representation of SHTG to broadcast and print media.
- Participation in monthly meetings of the SHTG Executive Team.
- Contribution to reports and evaluations of the work of the SHTG and relevant publications.

Person specification

The post holder must hold a substantive NHS post and be able to demonstrate the following key competencies and skills:

- Experience of developing clinical engagement and networking
- A strong personal commitment to the principles of technology appraisal and the ability to translate this into an effective vision for SHTG.
- An understanding of, and interest in, the development of advice for NHSScotland.
- The ability to effectively chair a large and complex multidisciplinary group.
- The ability to lead, influence, motivate and negotiate.
- Ability to clarify and summarise complex subjects for a multi-professional group
- Knowledge of structures and functions of NHSScotland and the Scottish Government.
- Professional credibility within their specialist field.
- Strong communication skills.

The post holder must declare any potential conflict of interest prior to, and during, appointment.

Appendix 3. Public partner role, remit and responsibilities

Public partners are Healthcare Improvement Scotland volunteers who support the organisation in a number of ways. SHTG have a total of four public partners who are full members of either the Council or ERT. Public partners can deputise for one another between the Council and ERT to ensure coverage.

Role and responsibilities

- To provide the perspective of a member of the public on the evidence that is gathered and presented at SHTC and ERT meetings.
- To help ensure that the views of members of the general public, carers and patients are taken into account at SHTC and ERT meetings, when it has been possible to gather them.
- To provide comments on the plain language summaries, to ensure they are written in an easy to understand format.
- To contribute to the wider work of SHTG by taking part in working groups and SHTG seminars.

SHTG Public Partner Commitment

Members of the Council

- Comply with the Responsibilities of individual members of the Council
 - Attend SHTC meetings, which take place up to six times per year.
 - Read papers in advance of attending SHTC meetings, in order to be able to make an informed contribution. A significant amount of preparation time is required for attendance at these meetings due to the large number of papers. Papers are distributed approximately one week in advance and hard copies can be provided on request.
 - Inform the public involvement advisor of availability for meetings.

Members of ERT

- Comply with the Responsibilities of individual members of the ERT
 - Attend ERT meetings, which take place up to six times per year.
 - Read ERT papers in advance of attending ERT meetings, in order to be able to make an informed contribution.
 - Inform the public involvement advisor of availability for meetings.

General

- Provide comment on the plain language summaries within the timeframe specified.
- Participate in SHTG working groups as required and subject to availability.
- Represent SHTG at external events as required and subject to availability.
- Attend conferences and training events as required and subject to availability.

Skills, knowledge and experience required

Skills and Abilities

- Take in and understand information quickly and effectively.
- Express ideas concisely and offer constructive challenge as appropriate
- Share your views clearly and sensitively from a patient focus and public perspective.
- Sound judgment to weigh evidence in order to reach an objective and impartial conclusion.
- Work well as part of a team.
- Work as part of SHTG.

Knowledge

- A general interest in improving the patient experience of healthcare.

- An understanding of the importance of the public perspective being part of the workings of SHTG.
- An understanding of the potential impact of inequalities on health.

Experience

- Experience of participating in committees or formal meetings.
- Experience of public speaking including making formal and informal presentations (desirable)

Support

Public partners are encouraged to seek support if they feel they are unable to carry out a task or need to discuss any aspect of their role by contacting the SHTG public involvement advisor who can arrange appropriate assistance.

You will not be expected to do anything that you feel unable to. We will support you in your role as a volunteer with training and other opportunities where we can.

The language used in the meeting papers may be scientific and technical. You will be provided with support and training to help you in understanding these sufficiently to allow you to contribute a public perspective. As a public partner you are not required to understand all aspects of the research methodology and approaches used. However, if you there is anything that you are sent for a meeting which you would like further clarification on, the public involvement advisor should be contacted to ensure an adequate explanation is given to you.

All meetings will be held in accessible formats and individual access and support needs will be met accordingly. Public partners should notify the public involvement advisor of their needs in order to make appropriate arrangements.

We will provide you with training in the SHTG process, and a general introduction of the work of SHTG.

Type of support, expenses and other related matters

Expenses and other support will be provided in line with Healthcare Improvement Scotland policy.