



Public Health  
England



Department  
of Health

Protecting and improving the nation's health

# **THE NEW AND EMERGING RESPIRATORY VIRUS THREATS ADVISORY GROUP (NERVTAG)**

**Code of Practice for Members**

**Version 1.0 – November 2015**

# CODE OF PRACTICE FOR MEMBERS OF THE NEW AND EMERGING RESPIRATORY VIRUS THREATS ADVISORY GROUP

## INTRODUCTION

1. The role of the New and Emerging Respiratory Virus Threats Advisory Group (NERVTAG) is to act as an Advisory Group to provide the Chief Medical Officer (CMO) and the Department of Health (DH) and other Government departments, with scientific risk assessment and mitigation advice on the threat posed by new and emerging respiratory viruses and on options for their management.
2. The scope of the group includes new and emerging respiratory virus threats to human health including strains of influenza virus (regardless of origin), and other respiratory viruses with potential to cause epidemic or pandemic illness, or severe illness in a smaller number of cases.
3. The group draws on the expertise of scientists and health care professionals, including clinicians, microbiologists and public health practitioners, and colleagues in related disciplines. The group is supported by a scientific secretariat from Public Health England (PHE), and is scientifically independent.
4. In line with Government policy on standards in public life, openness and accountability, the NERVTAG Secretariat have drawn up the following Code of Practice which members are expected to follow in carrying out duties associated with the NERVTAG.

## TERMS OF REFERENCE AND COMMITTEE MEMBERSHIP

See the Terms of Reference and current membership list at [Annex A](#).

## PUBLIC SERVICE VALUES AND STANDARDS

5. Members of the NERVTAG must, at all times:
  - observe the highest standards of **impartiality**, **integrity** and **objectivity** in relation to the advice they provide and to the management of this public body;
  - be **accountable** for their activities and for the standard of advice they provide for Ministers. The Ministers of the sponsoring Department are answerable to Parliament, and the public more generally, for the policies and performance of the NERVTAG, including the policy framework within which it operates; and
  - act in accordance with Government policy on **openness**, and comply fully with the Code of Practice on Access to Government Information and any relevant legislation on disclosure of information
  - follow the Seven Principles of Public Life set out by the Committee on Standards in Public Life (see [Annex B](#)), as they apply to service on the NERVTAG;
  - comply with this Code of Practice, and ensure that they understand their duties, rights and responsibilities, and that they are familiar with the functions and role of the Committee and any relevant statements of Government policy;

- not misuse information gained in the course of their public service for personal gain or for political purpose, nor seek to use the opportunity of public service to promote their private interests or those of connected persons, firms businesses or other organisations; and
- not hold any paid or high-profile posts in a political party, and not engage in specific political activities on matters directly affecting the work of the Committee. When engaging in other political activities, members should be conscious of their public role and exercise proper discretion. These restrictions do not apply to MPs, local councillors or to Peers in relation to their conduct in the House of Lords

### **TERMS OF APPOINTMENT OF NERVTAG MEMBERS**

6. The Department of Health Senior Responsible Owner (SRO), on behalf of the Department of Health Ministers, makes appointments to the NERVTAG. The Department of Health Senior Responsible Officer determines the length of the appointment, which will be for up to a maximum of 3 years. Appointments may be terminated at a member's request, in the event of unsatisfactory attendance at meetings, if their conduct is out of keeping with this Code or at the Appointments Commission's discretion.
7. Appointment to the NERVTAG is on a voluntary basis and fees are not payable. However, members may claim travel and subsistence allowances at standard Department of Health rates, as given in Annex C.
8. Appointments to the Committee are made on merit and in accordance with the principles of the Code of Practice for Scientific Advisory Committees and the Code of Practice issued by the Commissioner for Public Appointments<sup>1</sup>. The Chair and Members are appointed as individuals to fulfil the terms of reference of the Committee, not as representatives of their particular profession, or of their employer or any interest group. Membership is not determined on a geographical basis but on suitability for the role, based on an assessment against criteria specified at the time of the recruitment of new Members. New appointments are made through an open competition following advertisement on GOV.UK and linking with relevant Professional Bodies or Networks informed about roles that may interest their members.
9. Criteria for candidates are set out in an application pack sent to those who express an interest in the posts. Candidates are short-listed against the criteria and then invited for interview with the most suitable candidate for a particular role selected by an appointments panel based on the candidate's application and interview.
10. All members including the Chair must go through an appraisal process once every 12 months. The Chair appraises members and a senior official signs off the appraisal of the Chair on behalf of PHE, in consultation with senior officials from the Department of Health.

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<sup>1</sup> [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/278498/11-1382-code-of-practice-scientific-advisory-committees.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/278498/11-1382-code-of-practice-scientific-advisory-committees.pdf)

11. Appointments may be suspended or terminated by the Department of Health, without compensation, in the event that a member fails to fulfil his or her obligations or for conduct which renders the member unfit to remain in office. Members may also resign from their office, if they wish.

## **ROLE OF MEMBERS**

12. Members are appointed by the Department's Senior Responsible Officer and are accountable to her and the Chair of NERVTAG, being mindful of the needs of the group. Specifically, they are accountable to the Chair of NERVTAG in the provision of the scientific risk assessment and mitigation advice on the threat posed by new and emerging respiratory virus threats and on options for their management. The main areas of responsibility are to:

- work as a NERVTAG committee member in a way that reflects the highest standards of public life;
- contribute to collectively working to agree accurate, helpful and timely briefing and advice from NERVTAG to CMO and others on new and emerging virus threats in papers or in person to support CMO at the Scientific Advisory Group for Emergencies (SAGE), drawing on the most recent clinical and scientific advice available;
- take personal responsibility for their part in the effective functioning of NERVTAG;
- take active part in subgroups, as appropriate; and
- understand and respect the need for confidentiality as many of the issues being discussed will directly or indirectly impact on policy issues which the Department is responsible for.

## **ROLE OF THE CHAIR**

13. The Chair has particular responsibility for providing effective leadership on the issues above. In addition, he/she is responsible for ensuring that the minutes of meetings, produced by the Secretariat, and any reports to Ministers accurately record the decisions taken and, where appropriate, the views of individual Committee members have been taken into account. The Chair will indicate that the minutes of meetings accurately reflect proceedings by "signing-off" once the Committee has agreed them. The Chair should provide effective leadership, in particular:

- ensuring that the committee carries out its functions effectively and does not exceed its powers or functions;
- ensuring that the minutes of meetings and any reports accurately record the views of the committee;
- ensuring that views of the committee are accurately represented when providing information to the general public and press;
- providing performance management of committee members; and
- ensuring that the committee manages appropriately any conflicts of interest that members and the Chair may have.

## **ROLE OF THE DEPUTY CHAIR**

14. NERVTAG has established, at the request of the Department, a Deputy Chair position to maximise Committee resilience (especially in any absence of the Chair), help with succession planning and committee member development. The Deputy Chair is responsible for chairing committee meetings and providing leadership if the Chair is unavoidably absent or when it is considered appropriate by the committee Chair.

## **ROLE OF THE SECRETARIAT**

15. The Secretariat is provided by Public Health England (PHE). The PHE Secretariat function has been delegated by the Department of Health. Communications between the Committee and DH will generally be through the Secretariat, except where it has been agreed that an individual member should act on the Committee's behalf.
16. The Secretariat is responsible for ensuring that the Committee does not exceed its powers or functions. It should also ensure that the Freedom of Information Act 2000 is complied with, and any complaints are dealt with appropriately.

## **CONFLICTS OF INTERESTS**

17. There must be no perception of conflict between a member's private interests and his/her responsibilities as a member of NERVTAG or a NERVTAG Sub-committee. All members of the NERVTAG and its Sub-committees must therefore follow the rules set out in the Declarations of Interests section of this Code.
18. Members must declare all their interests at the time of their appointment and must promptly notify the Secretariat of any changes. Before or at the start of every meeting members will be asked to declare any changes to their interests and the minutes of each meeting will include interests that are declared and how they have been handled. In addition, it is the responsibility of each member to indicate if they have an interest in any item of business on the agenda of a meeting of NERVTAG or a NERVTAG Sub-committee at the appropriate time. Where this happens, in accordance with the provisions below, the Chair will determine whether a member should take part in any discussion or decision on an issue.
19. At the actual meeting, the members will be asked to declare any conflict of interest relevant to items on a meeting agenda at the outset of the meeting. This needs to be recorded in the minutes, along with names of any persons who declare a conflict. The Chair should then explain how this will be handled in the meeting and this also needs to be recorded in the minutes. It is appropriate for all members to be in attendance for discussion for the part of the meeting relating to data/evidence gathering stage of proceedings), but any members with a potential conflict should **not** be part of any subsequent discussion on NERVTAG advice or recommendations on that issue. They may be asked to leave this part of the meeting and this should be recorded in the minutes.

## **DECLARATIONS OF INTERESTS**

20. It is important to avoid any danger of members of the NERVTAG being influenced, or appearing to be influenced, by their private interests in the exercise of their public duties. All members should, therefore, declare any personal or business interests relevant to the work of the NERVTAG which may, or may be perceived (by a reasonable member of the public) to influence their judgement. This should include,

as a minimum, payments to members personally and payments to the relevant part of the organisation for which a member works. Members should be aware of their responsibility not to be seen to allow their judgement to be influenced in considering receipt of any gifts or hospitality offered in the exercise of their public duties.

21. If members feel that there are interests, outside the scope of this Code, which could be perceived as influencing their work in relation to the NERVATG, for example the personal or business interests of close family members (personal partners, parents, children, brothers and sisters and the personal partners of any of these) they should declare those or approach the Secretariat for advice.

### **DECLARATIONS OF INTERESTS AT MEETINGS**

22. A declaration of any interest should be made at any Committee meeting where it relates specifically to a particular issue under discussion. The Secretariat will record this declaration in the minutes (whether or not a member also withdraws from the meeting). It may not be appropriate for members to participate in the discussion or determination of matters in which they have an interest, and may be asked by the Chair to withdraw from the meeting.

### **REGISTER OF INTERESTS**

23. The Secretariat is required to publish an up-to-date register of members' interests. Members should notify the Secretariat immediately of any changes to their entry.

### **HANDLING OF NERVATAG PAPERS**

24. NERVATAG and its Sub-committees must comply with the Freedom of Information Act 2000 (FOIA) which came into force on 1st January 2005. All NERVATAG papers are potentially disclosable under the Freedom of Information Act 2000 or the Environmental Information Regulations 2004, and can be made available to interested outside individuals on request. All papers will be classified either 'Open' or 'Closed'. Closed papers will include those where committee advice is in development and matters of a confidential or sensitive nature. All committee meeting minutes and committee advice/recommendations will be made public.
25. The Committee is committed to making as much of its work open to public scrutiny as possible. However, as information discussed by NERVATAG may not be in the public domain NERVATAG will meet in closed session. This allows members to have free and open debate before coming to any conclusions, which will be fully and explained clearly in minutes or statements when these are published. Certain information may be exempt from disclosure under the Freedom of Information Act (FOIA) 2000 or the Environmental Information Regulations 2004. A list of examples of where information may be withheld, and most likely to be relevant to NERVATAG, is set out below:
26. Summary reasons will normally be given why particular papers are being withheld from routine publication, in line with exemptions available under the FOIA. Examples are:
  - 'Published' – s.32 'information accessible to applicant by other means';
  - 'Pre-publication' - s.22 'information intended for future publication' or s.41 'information provided in confidence';
  - 'Commercial' – s.43 'commercial interests'; and

- 'Policy' - s.35 'formulation of government policy, etc.'

### **DEVELOPMENT OF NERVTAG ADVICE AND RECOMMENDATIONS**

27. NERVTAG formulates advice and recommendations based on appraisal of the best scientific and other evidence available reflecting current good practice and/or expert opinion. The process involves a robust, transparent, and comprehensive appraisal of the available evidence from a wide range of sources. Advice or recommendations are normally formulated during the course of meetings. If a matter requires an urgent response the Secretariat, with the agreement of the NERVTAG Chair, may seek the relevant advice by correspondence or telephone conference with the Committee and similarly with a Sub-committee Chair for a Sub-committee.

### **COMMUNICATIONS WITH UK HEALTH DEPARTMENTS**

28. Communications between the Committee will be through the senior officials in Department of Health via the Secretariat, with the NERVTAG Chair. Generally the Committee will communicate its advice to UK health departments through the published minutes of Committee and Sub-committee meetings and statements produced by the Committee. Ministers or Chief Scientific/Medical Advisors may request advice from the Committee directly or to meet with the NERVTAG Chair. Representatives from UK Health Departments are invited to attend NERVTAG meetings as observers.

### **RELATIONS WITH THE MEDIA**

29. The Secretariat with the Department of Health Press Offices will usually be responsible for handling media enquiries about the NERVTAG and its work. Members who are approached directly by the media with enquiries relating to NERVTAG business should contact the Secretariat in the first place, for advice on handling.
30. Members may, in the course of their work, address conferences and seminars, or have other speaking arrangements at which the media are present. In these circumstances, members should take care to make it clear that they are speaking in a personal capacity and not as a member of the NERVTAG.

## **PERSONAL LIABILITY OF NERVTAG MEMBERS**

31. The cabinet office 'Model Code of Practice for Board Members of Advisory Non-Departmental Public Bodies (see pages 27-34 of publication) states that: *“Legal proceedings by a third party against individual board members of advisory bodies are very exceptional. A board member may be personally liable if he or she makes a fraudulent or negligent statement which result in a loss to a third party; or may commit a breach of confidence under common law or criminal offence under insider dealing legislation, if he or she misuses information gained through their position. However, the Government has indicated that individual board members who have acted honestly, reasonably, in good faith and without negligence will not have to meet out of their own personal resources any personal civil liability which is incurred in execution or purported execution of their board functions. Board members who need further advice should consult the sponsor department.”*



## **ANNEX A** (November 2015)

### **NERVTAG TERMS OF REFERENCE AND MEMBERSHIP**

#### **Role and establishment**

The role of NERVTAG is to act as an Advisory Group to provide the Chief Medical Officer (CMO) and, through the CMO, ministers, the Department of Health (DH) and other Government departments, with scientific risk assessment and mitigation advice on the threat posed by new and emerging respiratory virus threats and on options for their management.

The group will draw on the expertise of scientists and health care professionals, including clinicians, microbiologists and public health practitioners, and colleagues in related disciplines. The group is supported by a scientific secretariat from Public Health England (PHE), and is scientifically independent. Members of the Group are expected to adhere to the Code of Practice adopted by the Advisory Committee on Dangerous Pathogens (ACDP).

The scope of the group would include new and emerging respiratory virus threats to human health including strains of influenza virus (regardless of origin), and other respiratory viruses with potential to cause epidemic or pandemic illness, or severe illness in a smaller number of cases.

#### **Core membership**

Chair: external independent health scientist, formally appointed through an independent process

- Surveillance and epidemiology national
- Public health microbiology national
- Academic infectious disease epidemiology
- Academic microbiology
- Virology
- Clinical respiratory medicine
- Emergency preparedness/response
- Modelling
- Behavioural Sciences (to be appointed)

#### **Co-opted**

Nominee on Emergency response

Nominee from NHS England

Nominee from DEFRA

#### **Observers**

Nominees from DH, other UK Health Departments

Nominees from Other Government Departments

#### **Additional members as required (depending on nature of threat)**

Public health local (PHEC and/or DPH)

PHE Field Epidemiology

PHE public health microbiology local

Public health ethics

PHE travel and migrant health

**Secretariat:** The secretariat is provided by Public Health England.

### **Relationship with other committees and emergency arrangements**

Outputs from NERVTAG will feed into the Department of Health pandemic preparedness arrangements, particularly through the Pandemic Influenza Programme (PIP) Board.

In the event of a pandemic NERVTAG will be subsumed by the Health Strategic Advisory Group (HSAG) with individual members being drawn from NERVTAG as necessary, at the discretion of the CMO. HSAG would feed scientific advice into the Scientific Advisory Group for Emergencies (SAGE) which is co-chaired by the CMO and Chief Scientific Advisor.

NERVTAG may ask the Strategic Pandemic Influenza sub-committee on modelling (SPI-M) to undertake specific modelling work as necessary. In the event of a pandemic, SPI-M would report independently into SAGE.

### **Subgroups**

Task and finish sub-groups of the main Group will be established as necessary with a view to ensuring adequate consideration of detailed technical aspects of the work of the Group. The Chair of each sub-group would sit on the main group, and other members of the sub-groups invited to attend the main Group on an ad hoc basis.

### **Meetings**

In view of the responsive role of the Group, most of its meetings would be scheduled ad hoc. In order, however, to maintain continuity of the group and ensure that supporting activities were implemented and maintained, an annual meeting will be convened if ad hoc meetings have not taken place. Minutes of meetings will be made publicly available and published in full unless they contain confidential or commercially sensitive information.

## Membership

Current members are:

- Professor Jonathan Nguyen Van-Tam, Chair: University of Nottingham
- Professor Wendy Barclay: Imperial College London
- Dr Matthew Donati: Public Health England, Bristol Public Health Laboratory and University Hospitals Trust
- Professor John Edmunds: London School of Hygiene and Tropical Medicine
- Professor Neil Ferguson: Medical Research Council
- Professor Andrew Hayward: University College London
- Professor Peter Horby: University of Oxford
- Dr Benjamin Killingley: Whittington Hospitals NHS Trust
- Dr Wei Shen Lim: Nottingham University Hospitals NHS Trust
- Dr Jim McMenamin: Health Protection Scotland
- Professor Peter Openshaw: Imperial College London
- Dr Malcolm Semple: University of Liverpool
- Dr Chloe Sellwood: Co-opted Member, NHS England
- Dr Bob Winter: Co-opted Member, NHS England

**THE SEVEN PRINCIPLES OF PUBLIC LIFE****Selflessness**

Holders of public office should take decisions solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their family, or their friends.

**Integrity**

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might influence them in the performance of their official duties.

**Objectivity**

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for awards and benefits, holders of public office should make choices on merit.

**Accountability**

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

**Openness**

Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interests clearly demands.

**Honesty**

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interests.

**Leadership**

Holders of public office should promote and support these principles by leadership and example.

**TRAVEL EXPENSES AND SUBSISTENCE\***

1. You are entitled to claim travelling expenses and subsistence in line with the conditions below.

**Travel expenses**

2. Details of the method of travel should be given on the claim form. Receipts, tickets, ticket numbers or other proof of purchase are required for all claims for public transport travelling expenses. If for any reason, tickets etc. are no longer available, an explanatory note should be provided with the claim form.
3. The full cost of travel as a consequence of attendance at committee meetings will be reimbursed. You are asked to use the most economical method of transport available.
4. Mileage allowances for travel by private car will be paid at a rate of 40p per mile.
5. Public Health England and the Department of Health will not accept any liability in the event of any accident, damage, injury or death, or in respect of risks not covered by your own insurance policies.
6. In case of urgency, receipted costs in relation to taxi fares and any reasonable gratuity may be claimed where no public transport is reasonably available.

**Subsistence***Day Subsistence*

7. An allowance may be paid to Committee members when absent from home on Committee business for more than five hours, when appropriate refreshments have not otherwise been provided. The rates payable are detailed below.

<b>DAY SUBSISTENCE RATES</b>	<b>Rate</b>
<b>Period of absence</b>	
Meal allowance (5 or more hours away)	£5.00*
Meal allowance (more than 10 hours away)	£10.00*
Meal allowance (more than 10 hours away and return after 7pm)	£15.00