

BOARD MEETING HELD IN PUBLIC

Date/Time Thursday, 30 March 2017 – 10:45 to 12:45
Location Rooms 102A & 124A, Skipton House, London

MINUTES

RECORD OF MEETING

1. Welcome, Introduction & Apologies

- 1.1 The Chairman welcomed everyone to the meeting, noting that the Board is committed to openness and transparency. The Board transacted its business in public, though it was not a public meeting.
- 1.2 There were no apologies for absence.
- 1.3 The following declarations of interests in respect of specific items on the agenda for this meeting were made:
- Professor Sir John Burn recorded a new role as specialist advisor to the House of Commons on Genomics, which he had undertaken with an understanding that he would speak in relation to his NHS role.
 - David Roberts recorded that he had family members who worked in General Practice.
- 1.4 The Board agreed that neither declaration would exclude participation in the relevant discussions.
- 1.5 The Chairman welcomed Professor Sue Hill, Chief Scientific Officer, and Rosamond Roughton, Director of NHS Commissioning, who were in attendance for the agenda items on Genomics and General Practice Services respectively.

2. Minutes of the Previous Meeting

- 2.1 The minutes of the meeting held on 9 February 2017 were approved. There were no matters arising.

3. Chairman's Report

- 3.1 The Chairman informed the Board that, along with the Chief Executive, he had recently attended a regular accountability meeting with the Department of Health, during which the draft Mandate for 2017-18 had been discussed.
- 3.2 He reported that he had attended meetings with NHS Improvement and also other Arm's Length Bodies, many jointly with the Chief Executive.
- 3.3 He further reported that he continued to work closely on the development of the life sciences strategy, both as chair of NHSE and as a non-executive director of Genomics England Ltd.
- 3.4 He offered congratulations to Simon Enright who had recently been named, by PR Week, as one of the top ten PR people in the public sector.
- 3.5 He noted that the Board would, immediately after the meeting, be participating in an Awards Ceremony to recognise and acknowledge staff who had been nominated by their colleagues as having gone the extra mile for NHS England.
- 3.6 The Board received and noted the Chairman's report.

4. Chief Executive's Report

- 4.1 The Chief Executive updated the Board on the following areas:

- He placed on record thanks to the staff of the NHS in London who had responded to the Westminster attacks the previous week.
- He reported that the Executive team had held meetings around the country, including in Hull and in Whitstable, and that he had attended three Public Accounts and Health Select Committee hearings covering integration, GP access and Learning Disability Services.
- He also reported that NHS England continued to have conversations with the GP Committee of the British Medical Association, with Life Sciences companies particularly around new medicines. He had spoken recently at conferences on Health and Work and of Chief Scientific Officers.

4.3 The Board received and noted the Chief Executive's report.

5. NHS England Mandate and Business Plan 2017-19

5.3 The Chief Executive reminded the Board of the requirement for NHS England to publish a Business Plan by 31 March each year and stated that the document which would be published the following day goes wider than describing only the actions required by NHS England – it would be a broader system response to the challenges facing the NHS, setting out the practical steps that would be required to improve the areas of greatest concern for the public, as well as focussing on how these would be delivered. The document was a collective endeavour with other NHS Arms' Length Bodies.

5.4 He reminded the Board that a decision had previously been taken to allow sign off of the final document with the Chief Executive, Chair and Vice Chair, but with Board engagement throughout, and he thanked all Non-Executive and Executive Directors for their input.

5.5 The Board noted the publication of the Mandate 2017-18 and the forthcoming publication of *Next Steps on the Five Year Forward View*.

6. Creating a Genomic medicine service to lay the foundations to deliver personalised interventions and treatments

6.1 Professor Sir Bruce Keogh reminded the Board that this had been the third time Genomics had been considered by the Board, outlining the context and stressing the potential clinical significance of genomic medicine to the NHS.

6.2 Professor Sue Hill said that the proposals set out an ambitious future vision for the NHS to fully embed genomics into routine care and outlined the multiple elements of the proposals, and responded to questions raised by directors .

6.3 The Chairman thanked Professor Hill for the paper and the discussion, remarking that the Board noted the discussion but recognised that there were still many issues including funding to be addressed.

6.4 The Board received and noted the update and endorsed the strategy set out in the paper.

7. General Practice Services – programme update

7.1 Professor Sir Bruce Keogh reminded the Board that, just under one year previously, it had adopted and published the Five Year Forward View for General Practice.

7.2 Rosamond Roughton provided the Board with an update on the work programme, and reminded the Board that the document that had been published had been designed to do three things for General Practice: to recognise the pressure and the relative under-funding, to stabilise the service under pressure, and to support the service to transform.

7.3 The Board received and noted the update provided.

8. NHS England Corporate and NHS Performance Report

8.1 Matthew Swindells reviewed the latest activity and performance data. He noted further increases in the numbers of delayed transfers of care, with the number of patients waiting for social care packages continuing to rise, the reduction in A&E performance and the continued pressure on access to services due to the increased pressure on beds.

8.2 He reported that 197,000 bed days had been lost in January – a 17.1% increase in the number of beds lost due to NHS delays, with a 39% increase in the number of beds lost due to social care delays.

8.3 He stated that in the coming year there would be a significant focus on the NHS improving its discharge management arrangements, but that it would also be critical that social care funding was used to ensure that patients requiring social care interventions can access those services in a timely manner.

8.4 He reported that on elective services the referral to treatment within 18 weeks standard had improved slightly in the previous month.

8.5 Karen Wheeler provided the Board with further assurance that NHS England continues to deliver against national programme plans. She reported that the *Next Steps on the Five Year Forward View* document, due to be published the following day, had provided the opportunity to refocus these programmes to ensure they were fully connected to local delivery.

8.6 The Board received and noted the report.

9. NHS Finance Report

9.1 Paul Baumann updated the Board on the latest financial data for the commissioning system, noting that the data presented reflected the position at the end of February 2017.

9.2 He reflected once again that this had been a year of significant operational and financial challenges for the NHS as a whole, and in the commissioning sector in particular, but that finances appeared to be on course to deliver a balanced position, although with the caveat that the final position would be dependent upon the final detail on provider sector finances.

9.3 The Vice Chair remarked that the current position was as a result of some very effective and good management across the commissioning sector, offset by some difficult trade-offs within central budgets. He further remarked that it was important to recognise that the same approach to managing the aggregate budget in the coming year would not be sufficient.

9.4 The Board received and noted the report, commending the work of both NHS England and CCG teams.

10. Emergency Preparedness, Resilience and Response (EPRR)

10.1 Matthew Swindells reminded the Board that, whenever the Civil Contingencies Act comes into force, NHS England takes control of all NHS resources.

10.2 In the past year he had taken on accountable officer responsibility for EPRR from Richard Barker, and he thanked him for his stewardship. Anne Rainsberry, Regional Director for London, continues to be the national lead for EPRR and takes on the role of incident director for any national emergency.

10.3 He confirmed that the update provided for the Board would form part of the annual assurance statement to the Department of Health for the year 2016-17.

10.4 Matthew reported that over the past year the national EPRR team have

conducted assurance of readiness of NHS England regional structures and CCGs to deal with an incident; have undertaken deep dive reviews on business continuity and preparedness for a fuel disruption incident; have participated in a national pandemic flu exercise and have responded to a number of incidents, including junior doctors' industrial action, an E-coli outbreak, the derailment of a tram in Croydon and the previous week's terrorist attack.

10.5 Over the coming year the EPRR team would be continuing to ensure that NHS England staff are trained, and finalising work on the NHS response to a mass casualty incident.

10.6 The Board received and noted the report.

11. Safeguarding – Update on Current Progress

11.1 Jane Cummings provided the Board with an update on the work of the safeguarding.

11.2 She reported that the Prevent statutory duty, which had been published in 2015 and applies specifically to NHS trusts, has now been included in the NHS standard contract.

11.3 She reported that, since the Rother Inquiry into Child Sexual Exploitation (CSE), the team have provided leadership in the key areas of commissioning and the training of front line practitioners to recognise CSE.

11.4 Jane also reported that the Child Protection Information System (CP-IS) was the first national system that could share information effectively across health and care settings – a vital tool in protecting vulnerable children and young people and preventing further harm.

11.5 The Board received and noted the update.

12. Strengthening patient and public participation in NHS England – update and revised policy

12.1 Lord Victor Adebawale informed the Board that the Patient and Public Participation Taskforce was reaching the end of phase 1 of its workplan, and work was underway on the next phase.

12.2 Jane Cummings reminded the Board that, in November 2015, it had approved the Patient and Public Participation Policy along with the accompanying Statement of Arrangements and Guidance on Involving Patients and the Public in Commissioning, together with a ten point action plan designed to support implementation.

12.3 She reported that a commitment had been made in November 2015 to provide a further report to the Board by March 2017 to evaluate the implementation and impact of the policy, arrangements and action plan.

12.4 Jane reported that the policy had been revised and simplified and requested the Board's approval of the revised policy.

12.5 The Board noted the update and approved the revised policy.

13. Reports from Board Committees

13.1 The Board noted the report from the Commissioning Committee meeting held on 8 February 2017, and ratified the decision taken at the Committee meeting held the previous day to delegate primary care commissioning to the newly merged Manchester CCG.

13.2 The Board noted the report from the Investment Committee meetings held on 25 January 2017 and 23 February 2017.

13.3 The Board noted the report from the Audit and Risk Assurance Committee held

on 1 March 2017.

13.4 Noel Gordon informed the Board that there had been a comprehensive discussion at the Specialised Services Commissioning Committee on 23 February, attended also by colleagues from NICE, on the joint consultation with NICE on changes to the technology appraisal and highly specialised technologies programme.

13.5 He remarked that the proposals were intended to provide: quicker access for patients to the most cost-effective new treatments; more flexibility in the adoption of technologies into the NHS which are cost effective but high in budget impact; and greater clarity for patients and companies about the level at which treatments for very rare conditions will receive automatic funding.

13.6 He reported that the consideration given to this complex and important change in policy had been thorough, and that the Committee had, on behalf of the Board, endorsed the approach, as subsequently had the NICE Board .

13.7 The Board noted the update from the Specialised Services Commissioning Committee meetings held on 23 January 2017 and 22 February 2017.

14. Any other business

14.1 There were no further items of business to be discussed.

14.2 The Board resolved to exclude representatives of the media and members of the public from the remainder of the meeting (due to the confidential nature of the business to be transacted) and the meeting was closed.

Agreed as an Accurate Record of the Meeting	
Date:	
Signature:	
Name:	Professor Sir Malcolm Grant
Title:	NHS England Chairman

Members:

Professor Sir Malcolm Grant	Chairman
David Roberts	Vice Chairman, Chair of Commissioning Committee
Simon Stevens	Chief Executive Officer (CEO)
Lord Victor Adebowale	Non-Executive Member
Wendy Becker	Non-Executive Member
Professor Sir John Burn	Non-Executive Member
Dame Moira Gibb	Non-Executive Member and Chair of Investment Committee
Noel Gordon	Non-Executive Member and Chair of Specialised Services Commissioning Committee
Michelle Mitchell	Non-Executive Member
Joanne Shaw	Non-Executive Member and Chair of Audit and Risk Assurance Committee
Paul Baumann	Chief Financial Officer (CFO)
Professor Jane Cummings	Chief Nursing Officer (CNO)
Sir Bruce Keogh	National Medical Director (NMD)
Ian Dodge	National Director: Commissioning Strategy (ND:CS)
Matthew Swindells	National Director: Operations & Information (ND:O&I)
Karen Wheeler	National Director: Transformation and Corporate Operations (ND:TCO)

Apologies:**Secretariat:**

Lesley Tillotson	Board Secretary
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