

Chair's Report to the Board

1. I am pleased to offer the Board a brief summary of my activities as Chair over the period since our last meeting, which was on 4 July 2018. Much of the focus over this period has been on developing a new working relationship with NHS Improvement, and on developing the next stage of the roll-out of clinical genomics into the NHS.

NHS70

2. It was a privilege to participate alongside other Board directors and staff of NHS England in the nation's celebration of the founding of the NHS 70 years ago. Many NHSE colleagues attended the NHS70 Parliamentary Awards event at the House of Commons on July 4; and the special celebration service at Westminster Abbey on July 7. I also attended and addressed the choral concert that evening in York Minster. I have on behalf of the Board extended thanks to the various NHSE teams who made these events such a memorable success.

Future working with NHS Improvement

3. Bringing the two organisations together into a much closer working relationship, whilst still properly observing the statutory constraints that prevent full merger, is a major complex exercise. It will involve new ways of working for staff and also for our respective boards. But the prize is significant – an ability to plan and deliver healthcare across the commissioner/provider divide, to deliver joined-up national leadership and to eliminate the high transaction costs of unproductive division.
4. A significant amount of work has been undertaken over the summer, and is reflected in the papers that will go to tomorrow's meeting in public of the two Boards together. It will not be a *joint* meeting, but a meeting *in common*, around shared business between the Boards. Each Board retains its distinct statutory functions and responsibilities. It means that business that would normally have come to this meeting in public of the Board of NHSE is being taken instead to tomorrow's meeting, including papers that have been jointly worked up on preparations for winter; on financial and operational performance; on the long term plan for the NHS; an update on integrated care systems, and papers relating to our future working together.
5. In order to take this work through over the coming months **I should like to invite the Board to delegate the formal approval of necessary amendments to governance documents (Standing Orders, Standing Financial Instructions and Scheme of Delegation), to go in the first**

instance to ARAC as usual, but then to the Chair and CEO together for approval on behalf of the Board. While we should anticipate that much of this work can be brought to a formal Board meeting for approval, it is entirely possible (because of all the various pieces of work through the transition programme that will inform this) that some will require approval outside the formal Board cycle of meetings. **I invite the Board to approve these delegation arrangements for a temporary period running from now through to 31 March 2019,** so that the necessary approved and ratified governance documents can be in place ahead of the launch of the new Executive Structures, allowing all of the necessary formal delegations to be in place through the SFIs and the SoD.

Genomics

6. The successful completion of the 100k Genomes Project is in sight and on target for the end of 2018. The NHS has stepped up superbly to the challenge of preparing and submitting high quality samples of DNA for sequencing, notwithstanding the changes this has required to clinical laboratory practice and to clinical pathways across England. Of the 90,000 samples falling to the NHS, the Genomic Medicine Centres have now submitted the rare disease commitment of 60,000 (with a forecast of over 66,000 by year end) and are predicted to collect the 30,000 cancer samples for 24 cancer types by mid-December.
7. The analysis and reporting of results back to the NHS is accelerating but still with some distance to go in relation to copy number variants and structural variants being returned for rare diseases and additional and secondary findings (if participants have consented to receiving them) – all of which, as they come through from Genomics England Ltd, will deepen the learning and potential actionability from whole genome sequencing as opposed to single genes, panels and exomes – the usual standard of care - and will continue to develop the NHS as the globally leading healthcare system in genomics.
8. We have been working closely with Genomics England Ltd to ensure the next phase of roll-out of whole genome sequencing into routine clinical care in the NHS and in securing the informatics and data developments - which will underpin the genomic medicine service – will enable further benefits for patients arising from the ongoing development and curation of the national genomic knowledge and research environment.
9. I have served as a board director of Genomics England Ltd (a wholly government-owned company) since its inception, and have now tendered my resignation from that role with effect from end-October.

Other activities

10. Some other external-facing activity since the last NHSE Board:
 - a. Co-chaired the quarterly NHSE meeting with Medical Royal College Presidents, July 10

- b. Chaired the Healthy New Towns Steering Group, 4 September
- c. Healthcare Expo, Manchester, September 5 and 6: opening address (with Dido Harding); the NHS England formal AGM; the Kate Granger awards; Healthcare UK symposium; panellist in Genomics session 'Cracking the code'; Keynote speech "Research and innovation at the heart of the NHS".
- d. Introductory meeting with Dame Julia Goodfellow, incoming Chair of Public Health England, September 13
- e. 18th Asian Achievers Awards, September 14
- f. Genomics England Ltd Board meeting, September 18
- g. NHSE/I joint visit to United Lincolnshire Hospitals (with Dido Harding), September 20
- h. UK Commissioning for Health Show: keynote speech and panellist: "Prioritising funding and resources, today, tomorrow and beyond"; September 25
- i. Participated in the Independent Projects Authority review of the 100k genomes project.

Appointments

- 11. I am pleased to report formally to the Board the reappointment by the Secretary of State of Noel Gordon and David Roberts for second terms, of three years in each case, from 1 July 2018.
- 12. The Rt Hon Matt Hancock was appointed Secretary of State for Health and Social Care on July 9, 2018, in succession to Jeremy Hunt. We have been working closely with him in his new role.
- 13. The appointment has now been confirmed of Dame Julia Goodfellow as Chair of Public Health England, from 17 September 2018, in succession to Professor David Heymann, following a period of interim chairmanship under Sir Derek Myers.
- 14. Professor Rosie Benneyworth will serve as acting chair of NICE during the forthcoming period of absence of Sir David Haslam.
- 15. The following new non-executive directors have been appointed by the Secretary of State to the Board of NHS Improvement: Sir Andrew Morris, former CEO of Frimley Health NHS Trust; Wol Kolade, chair of Guy's and St Thomas's Charity; Laura Wade-Gery, former CEO of Tesco.com and currently non-executive of John Lewis Partnership; Tim Ferris MD, CEO of Massachusetts General Physicians Organisation and former senior vice-president of Partners Healthcare in Boston, USA.

Chair of NHS England

16. The Government announced earlier this month the nomination of Lord David Prior as the preferred candidate to assume the Chair with effect from the expiry of my second term of office, at the end of October. The proposal was endorsed by the House of Commons Health Select Committee following a pre-confirmatory hearing on 10 September, subject to a recommendation that he should relinquish the party whip in the House of Lords. Formal appointment is expected shortly and will be warmly welcomed by the Board. As former chair of the Care Quality Commission, a former Health Minister in the House of Lords and as current chair of UCL Hospitals NHS Foundation Trust, he is experienced and knowledgeable, and he takes over the role of Chair at a critically important time in the life of the NHS in England.

Malcolm Grant
26 September 2018