

DRAFT MINUTES OF A MEETING OF THE NHS IMPROVEMENT BOARD HELD ON THURSDAY 28 APRIL 2016 AT 13.30 AT WELLINGTON HOUSE, 133-155 WATERLOO ROAD, LONDON SE18UG – SUBJECT TO APPROVAL AT THE MEETING OF THE BOARD ON 26 MAY 2016

Present:

Ed Smith, Chairman
Bob Alexander, Executive Director of Resources / Deputy Chief Executive
Dame Glynis Breakwell, Non-Executive Director
Laura Carstensen, Non-Executive Director
Lord Ara Darzi, Non-Executive Director
Richard Douglas, Non-Executive Director
Sarah Harkness, Non-Executive Director
Stephen Hay, Executive Director of Regulation / Deputy Chief Executive
Jim Mackey, Chief Executive
Ruth May, Executive Director of Nursing
Kathy McLean, Executive Medical Director
Sigurd Reinton, Non-Executive Director
Caroline Thomson, Non-Executive Director

In attendance:

Jessica Dahlstrom, Head of Governance
Kate Moore, General Counsel

1 Welcome and apologies (oral item)

- 1.1 Apologies for absence had been received from Sir Peter Carr (Non-Executive Director) and Lord Carter (Non-Executive Director).
- 1.2 It was agreed by all present that the public session of this Board meeting would be recorded on film, and made available on the internet.
- 1.3 The Chairman welcomed Board members to the first meeting of the NHS Improvement Board. It was noted that effective governance was a priority for the organisation. It was also noted that whilst the Board would delegate responsibility for various matters to committees and Task & Finish Groups, it would ensure appropriate and timely information flows to the Board. Board development was also a priority, and a facilitator would be appointed to assist the Board in this regard. The Board noted that representatives of key partner organisations, including NHS England and the Care Quality Commission (CQC), would be invited to future meetings of the Board.
- 1.4 There were no declarations of interest.

2 Minutes and matters arising from the meeting held on Tuesday 22 March 2016 (BM/16/38)

- 2.1 The minutes of the meeting held on Tuesday 22 March 2016 were approved.
- 2.2 It was agreed that the Corporate Report, item 8 on the public agenda, would be unstarred for discussion.

3 Chief Executive's report (BM/16/39)

- 3.1 The Chief Executive provided an update on the process of agreeing contracts between providers and commissioners for the financial year 2016/17. It was noted that this process was now reaching its final stages, but a number of issues remained to be resolved.
- 3.2 The Chief Executive commended the staff and leadership team at Colchester Hospital University NHS Foundation Trust for continuing to address the issues which needed to be resolved at the organisation. It was noted that significant progress had been made by the Trust.
- 3.3 The Chief Executive thanked all providers for their efforts to manage the impact of the junior doctors' industrial action. The impact of the industrial action was discussed, and it was noted that no serious incidents had been reported. However, the Board noted that the impact of cancelled appointments and operations would need to be examined.
- 3.4 The Board discussed the programme of external engagements for the Chairman, Chief Executive and other Board members. It was agreed that an external engagement strategy would be developed, and that this engagement strategy would include the Non-Executive Directors visiting providers around the country.

ACTION: JM

4 Integration Programme stocktake – Key achievements (BM/16/40)

John Wilderspin (Integration Director) attended for this item.

- 4.1 The Integration Director introduced the paper, which summarised achievements to date in relation to the creation of NHS Improvement. He thanked all NHS Improvement staff for their work in this regard.
- 4.2 The Board noted that there was a substantial amount of work still to be done to embed the operating model and enable cultural change. The importance of seeing the process as evolutionary was emphasised, and the Board noted that changes to the operating model could continue to be made as required to ensure the success of NHS Improvement.

- 4.3 The Board emphasised the importance of alignment with key partners, particularly with regard to interaction with the service.

5 NHS Improvement update

Catherine McDonald (Policy Director) attended for this item.

- 5.1 The Board noted the report, which provided an overview of the five key themes for NHS Improvement's objectives to 2020 within the context of the Five Year Forward View, as follows: quality, finance and use of resources, operational performance, strategic change and leadership and improvement capability. The Board commented that these themes should be considered in the context of the current challenging environment.
- 5.2 The Board discussed the interaction and link between operational performance and quality, and noted that all themes should be seen as part of one overarching goal, rather than a list of separate objectives.

6 Corporate Report (BM/16/43)

- 6.1 The notes from the minutes of the Technology and Data Assurance Committee meeting on 19 April 2016 were discussed. The importance of identifying and supporting the enablers for each of NHS Improvement's objectives was emphasised. It was noted that this would be reflected in the objective setting for the Executive Team.

7 Questions and comments from the public (oral item)

- 7.1 A member of the public asked a question regarding changes to the payment system for NHS service providers. The Executive Director of Resources confirmed that payment arrangements would continue to be the responsibility of NHS Improvement, and that the widest possible engagement with stakeholders would be arranged to inform NHS Improvement's thinking.
- 7.2 A member of the public asked a question regarding the publication of Month 11 performance data, which had not been published as part of the board papers for this meeting. The Board confirmed that a timetable for publication of performance data was currently being developed and would be announced in the near future.

8 Private session – resolution (oral item)

- 8.1 The Chair moved a resolution in order to move into private session to consider private items of business.

9 Chief Executive's update (oral item)

- 9.1 The Chief Executive provided an update to the Board on partnership working, and emphasised the importance of working closely with CQC particularly on defining success.
- 9.2 The Board discussed progress made on 2016/17 plans, and considered the issues that remained to be resolved. Additional savings would need to be identified before a final position could be agreed. As part of this process, it was important to consider the risks to service delivery.

10 Chairman's report (BM/16/44(P))

- 10.1 The Board noted the report and approved the proposed composition of the Board committees, which will be published on the NHS Improvement website.

11 Performance of the NHS provider sector (BM/16/45(P))

- 11.1 The Executive Director of Resources introduced the report, which outlined performance to the end of February 2016 and provided an early view on the likely year end performance.
- 11.2 The Board noted that there had been a reduction in capital expenditure, and discussed the potential implications. The Board requested that a methodology should be developed to enable the Board to review the link between capital expenditure delays or reductions to possible implications for service provision.

ACTION: BA

12 Junior doctors' industrial action: evaluation of impact (BM/16/46(P))

- 12.1 The Executive Medical Director introduced the report, which provided an overview of data available so far on the impact of the junior doctors' industrial action. An updated version of this paper would be presented to the Board in the public session in May 2016.

ACTION: KMcl

13 NHS Improvement's 2020 objectives (BM/16/47(P))

Helen Buckingham (Executive Director of Corporate Affairs), Dale Bywater (Executive Regional Managing Director, Midlands and East), Lisa Collins (Policy Director), Anne Eden (Acting Executive Regional Managing Director, South), Andrew Hines (Acting Executive Regional Managing Director, London), Catherine

McDonald (Policy Director), Adrian Masters (Executive Director of Strategy), Adam Sewell-Jones (Executive Director of Improvement), Lyn Simpson (Executive Regional Managing Director, North) and John Wilderspin (Integration Director) joined for this and all remaining agenda items.

- 13.1 The Board noted the report which set out proposed objectives for NHS Improvement to 2020. The importance of regarding these objectives as an integrated whole, and considering the interfaces between them, was emphasised.
- 13.2 The Board discussed the extent to which NHS Improvement's objectives should be aligned to the objectives of the service as a whole. The Board considered it important that NHS Improvement was clear on its accountabilities, and the assumptions it made regarding what needed to be delivered by others to ensure NHS Improvement was able to meet its objectives.
- 13.3 The Board discussed the difference between ambitions and objectives, and emphasised the importance of setting objectives which were achievable, sufficiently specific and measurable.
- 13.4 It was agreed that an updated version of the objectives, which incorporated the points raised by the Board, would be circulated to the Board in correspondence for approval, after which it would be published.

ACTION: CM

14 Business plan: Early overview of key themes (BM/16/48(P))

- 14.1 The Executive Director of Strategy introduced the report, which set out key themes for NHS Improvement's business plan for 2016/17.
- 14.2 The Board discussed the concept of earned autonomy, and emphasised the importance of keeping the regulatory burden imposed by NHS Improvement under review. It was observed that Monitor had a duty to carry out impact assessments where it was proposing to do something that it considered would be likely to have a significant impact on providers. Appropriate arrangements would be set up to oversee this.

ACTION: KM

- 14.3 The difficulties of developing a business plan when information on resources had not yet been finalised were discussed. It was also noted that enablers such as IT needed to be reflected in the business plan.
- 14.4 It was agreed that a more developed version of the business plan would be presented to the Board in May. This version would include any information available on resources, mapped to directorates where possible.

ACTION: LK

15 Operating model: main principles (BM/16/49i(P))

- 15.1 The Chief Executive introduced the report, and outlined recent developments in the operating model which included having national leads for key priority areas.
- 15.2 The importance of sharing the operating model with staff as soon as possible was discussed. A high-level version of the operating model would be shared with staff in May, and be submitted to the Board for information at the May Board meeting.

ACTION: CM

16 Operating model: oversight framework (BM/16/49ii(P))

- 16.1 The Board discussed the proposed draft oversight framework. The importance of taking a systems approach rather than focusing on individual providers was emphasised, and the interaction with the Sustainability and Transformation Plans was discussed.
- 16.2 The Board considered plans to consult on the oversight framework in June, and noted that a near final version of the framework would be presented to the Board in May. A number of Non-Executive Directors agreed to advise on the development of the framework, and meetings to enable this would be arranged.

ACTION: CM

17 NHS Improvement: Moving from an Integration Programme to an Improvement Programme (BM/16/50(P))

- 17.1 The Integration Director introduced the report, which outlined a proposed approach to the next phase of developing NHS Improvement, now that the integration phase had been largely completed.
- 17.2 The Board discussed and endorsed the recommendations in the paper, including the use of a network approach to delivering change. The Board emphasised the importance of visible leadership including at Executive level as part of this.

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