NHS Improvement

To:	The Board
For meeting on:	28 July 2016
Agenda item:	9
Report by:	Jessica Dahlstrom, Head of Governance
Report on:	Corporate Report

Introduction

1. The Corporate Report brings together reports of all of NHS Improvement's Board committees.

Technology and Data Assurance Committee – 4 July 2016

2. Terms of Reference: TDAC members noted the Committee's role and responsibility to set the information and IT strategy for NHS Improvement, and the Committee's advisory and assurance responsibilities towards the Board. The Committee considered the role of the Chief Information Technology Officer and the interaction with NHS Improvement, NHS England and the provider sector. The Terms of Reference were approved on the understanding that they might have to be reviewed again if and when the planned joint appointment of a CITO for NHSE and NHSI is made.

3. Purpose of the TDAC and ways of working: The October Board development session would be dedicated to making sure all board members have a shared understanding of the central role of effective IT systems and intelligent analytics based on good data if NHSI is to meet the expectations placed on it. The Committee discussed NHSI's contribution to the National Digital Strategy and the National Information Board and the need for NHSI to be appropriately involved in key programmes. The Chief Information Officer provided an update on the status of information technology and data in the context of the transition process to NHSI. There had been problems arising from the migration all NHSI staff to NHS Mail and the simultaneous upgrade to NHS Mail2 and associated issues over the level of support received during that period. It was noted that while the NHS Mail2 platform was currently stable, the delays associated with the transition had created an unavoidable impact on a number of other projects.

4. Full minutes of the meeting are attached as Annex A.

Audit and Risk Assurance Committee – 1 July 2016

5. Terms of Reference: The Committee considered and approved minor amendments to the Terms of Reference.

6. Assurance and Risk Management Framework and Strategic Risk Register: The Committee noted that the development of an approach to risk management was at a theoretical stage, and that networks needed to be built across the organisation to ensure that there was appropriate input from senior leaders in each area of the business. The importance of the Executive Team's role in identifying key strategic risks was emphasised.

7. Internal audit plan: The Committee considered the proposed internal audit plan for 2016/17 and noted that the plan as proposed would provide sufficient information for the internal auditors to provide an opinion at the year end. It was noted that the plan contained a contingency, and that the Committee would have the opportunity mid-year to reflect on progress made and add new priority areas. Potential additional areas for audit were identified by the Committee as follows: hosting by NHS Improvement of the Healthcare Safety Investigation Branch, strategic communications and reputation management, and transition to NHS Improvement of the Carter Review and associated team.

8. Annual assurance report: The Committee noted that the annual assurance report for the NHS Trust Development Authority (TDA) had already been approved by the TDA's Audit and Risk Committee. The Monitor annual assurance report, which provided moderate assurance, was considered.

9. Monitor and NHS Trust Development Authority 2015/16 annual report and accounts, and audit completion reports: The Committee noted the key issues associated with both sets of accounts, which included adhering to ring-fencing within Monitor's budget and ensuring transparency around programme funding within the TDA's budget. The Committee noted the audit completion appoints, and approved the annual report and accounts.

10. Consolidated NHS foundation trust accounts 2015/16 and audit completion report: The Committee noted the report, which set out the consolidated NHS foundation trust accounts for 2015/16. The Committee noted that no significant movements had been uncovered as part of the audit process, and approved the consolidated accounts.

11. NHS trust sector consolidated annual governance statement 2015/16: The Committee approved the report, which set out the NHS trust sector consolidated annual governance statement 2015/16.

12. Full minutes of the meeting are attached as Confidential Annex B.

Nominations and Remuneration Committee (internal) – 22 June 2016

13. Remuneration of an Executive Director: The Committee approved a remuneration proposal for a new Executive Director appointment.

14. In addition, the Committee approved the following items in correspondence:

    a. Revised Terms of Reference for the Committee.
    b. Annual pay uplift for staff.

Appointments and Remuneration Committee (external) – 26 May 2016

15. Terms of Reference: The Terms of Reference for the Committee were approved subject to comments made at the meeting to reflect the Committee's strategic role, and its role in relation to diversity.

16. Role of the Committee in relation to appointments: The Committee reviewed a report which set out the proposals for the arrangements for the exercise of NHS Improvement's functions that related to the appointment of Chairs and NEDs of NHS trusts, and NHS charity trustees. The report also set out the proposal for the approval of the arrangements for the removal or suspension of NHS trust chairs and NEDs and NHS Charity Trustees. Committee members noted that the Committee's proposed arrangements would be relying on a sub-committee structure to which a number of its responsibilities could be delegated in relation to the appointment of non-executive directors of NHS trusts.

17. Role of the Committee in relation to remuneration: The Committee reviewed a report which set out the oversight role of the Committee in NHS trust executive appointment, severance and pay issues. Monitor and NHS Trust Development Authority (TDA) had played different roles in the approval of these issues and the report addressed the current arrangements and proposals for future governance. It was noted that further review might be required following the implementation of the new operation model and trust segmentation.

18. Casework: The Committee considered a number of individual appointments and remuneration cases.

19. Quarterly report on appointments and remuneration activity: The Committee was provided with information in relation to the work on appointments and remuneration over the past quarter.

20. Full minutes are attached as Confidential Annex C.

NHS Trust Development Authority Investment Committee – 15 June 2016

21. The NHS Trust Development Authority Investment Committee met for the last time in June and approved the following cases:

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a. A full business case for a new in-patient ward block at the Royal National Orthopaedic Hospital NHS Trust;

b. A full business case for Imperial College Healthcare NHS Trust to develop the North West London pathology joint venture agreement and a strategic outline case for the procurement of pathology laboratory equipment services.

c. An outline business case for phase eight of Burnley General Hospital at East Lancashire Hospitals NHS Trust.

d. A strategic outline case for the procurement of pathology laboratory equipment and services at Brighton and Sussex University Hospitals NHS Trust.

Recommendation

22. The Board is asked to note recent committee activity.

Jessica Dahlstrom
Head of Governance

Public Sector Equality Duty

NHS Improvement has a duty under the Equality Act 2010 to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations between people from different groups. In relation to the issues set out in this paper, consideration has been given to the impact that the recommendations might have on these requirements and on the nine protected groups identified by the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, gender and sexual orientation).

As it is for information, it is anticipated that none of the recommendations of this paper will have an impact upon the requirements of or the protected groups identified by the Equality Act.

Exempt information:

None of this report is exempt under the Freedom of Information Act 2000.

MINUTES OF A MEETING OF THE TECHNOLOGY AND DATA ASSURANCE COMMITTEE HELD ON 4 JULY 2016 AT 11.00AM AT WELLINGTON HOUSE, LONDON SE1 8UG

Present:

Sigurd Reinton, Technology and Data Assurance Committee (TDAC) Chair, Non-Executive Director
Richard Douglas, TDAC Non-Executive Director (by telephone)
Paul Willer, TDAC Independent Member
Ted Woodhouse, TDAC Independent Member

In attendance:

Bob Alexander, Executive Director of Resources/Deputy CEO
Niamh Field, Governance Officer
Peter Sinden, Chief Information Officer

1. **Welcome and apologies**

1.1 Apologies for absence had been received from Dame Glynis Breakwell (TDAC Non-Executive Director), Jim Mackey (Chief Executive) and Iain Wallen (Director of Information and Analytics).

2. **Declarations of interest**

2.1 There were no declarations of interest.

3. **Technology and Data Assurance Committee Terms of Reference (TDAC/16/01)**

3.1 The TDAC considered the Terms of Reference (ToR) for the Committee. TDAC members noted the Committee's role and responsibility to set the information and IT strategy for NHS Improvement, and the Committee's advisory and assurance responsibilities towards the Board. It was noted that, as the Chairman of the Audit and Risk Advisory Committee (ARAC) is also a member of the TDAC he is well placed to ensure there was no gap or duplication in the reporting by the two Committees to the Board.

3.2 The Committee considered the role of the Chief Information Technology Officer and the interaction with NHS Improvement, NHS England and the provider sector.

3.3 The ToR were approved subject to the comments made at the meeting and on the understanding that they might have to be reviewed again if and when the planned joint appointment of a CITO for NHSE and NHSI is made.

4. Purpose of the TDAC and ways of working

4.1 The Chairman of NHSI had agreed that the October Board development session could be dedicated to making sure the entire board have a shared understanding of the central role of effective IT systems and intelligent analytics based on good data if NHSI is to meet the expectations placed on it.. The Chairman outlined the proposed structure and agenda for the session.

4.2 The Committee discussed NHSI's contribution to the National Digital Strategy and the National Information Board and the need for NHSI to be appropriately involved in key programmes. A note covering the requirements for the National Information Board would be circulated to TDAC members.

ACTION: PS

4.3 The importance of the progress of technology in the sector was highlighted in addition to understanding, and responding effectively to, the sector's needs. The need for NHSI to have a clear strategy to address the challenges facing the sector was discussed.

4.4 The Chief Information Officer provided an update on the status of information technology and data in the context of the transition process to NHSI. There had been problems arising from the migration all NHSI staff to NHS Mail and the simultaneous upgrade to NHS Mail2 and associated issues over the level of support received during that period. It was noted that while the NHS Mail2 platform was currently stable, the delays associated with the transition had created an unavoidable impact on a number of other projects. An update was also provided on mobile working and progress on the development of the Analytics Hub.

5. Any other business

5.1 There was no other business.

Close

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