

**MINUTES OF A MEETING OF THE NHS IMPROVEMENT BOARD MEETING  
HELD ON THURSDAY 24 MAY 2018 AT 15.30 AT SKIPTON HOUSE, 80 LONDON  
ROAD, LONDON SE1 6LH – SUBJECT TO APPROVAL AT THE MEETING OF  
THE BOARD ON 26 JULY 2018**

**Present:**

Baroness Dido Harding, Chair  
Lord Patrick Carter, Non-Executive Director  
Ian Dalton, Chief Executive  
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  
Ruth May, Executive Director of Nursing  
Kathy McLean, Executive Medical Director/Chief Operating Officer  
Sigurd Reinton, Non-Executive Director  
David Roberts, Associate Non-Executive Director

**In attendance:**

Jessica Dahlstrom, Head of Governance  
Sian Jarvis, Executive Director of Communications  
Kate Moore, General Counsel  
Elizabeth O'Mahony, Chief Financial Officer

**1. Welcome and apologies (oral item)**

- 1.1. Apologies for absence had been received from Professor Dame Glynis Breakwell (Non-Executive Director and Senior Independent Director).
- 1.2. There were no requests to unstar any of the starred items on the Board agenda. In relation to the Quality Dashboard, the Board welcomed the positive trend in Care Quality Commission (CQC) inspection ratings shown in the report.

**2. Minutes and matters arising from the meeting held on Thursday, 22 March 2018 (BM/18/28)**

- 2.1. The minutes from the meeting held on Thursday 22 March 2018 were approved and matters arising were noted.

**3. Chair's report (BM/18/29)**

- 3.1. The Chair introduced her report and highlighted the importance of the current investments being made in the organisational development of NHS

Improvement and the joint working with NHS England. An update on non-executive recruitment was provided and the Chair praised the Mental Health First Aid training course which was currently being made available to NHS Improvement staff which she had recently attended and strongly encouraged all present to do the training if not undertaken already.

#### **4. Chief Executive's report (BM/18/30)**

- 4.1. The Chief Executive reinforced the importance of the organisational design work and the increased joint working which had been discussed in detail during the Board meeting in common between NHS England and NHS Improvement.
- 4.2. The ongoing pressures on the NHS were highlighted and it was noted that the NHS was recovering from a long and challenging winter period. The Chief Executive praised the improvements which had been made by providers and congratulated both The Princess Alexandra Hospital Trust and the London Ambulance Service on their exits from Special Measures for quality reasons. The hard work of staff working for these organisations and at NHS Improvement was recognised and the London Ambulance Service was congratulated in particular on achieving a 'Good' rating from the CQC with a rating of 'Outstanding' for patient care.

#### **5. Update on actions taken in response to Independent review into Liverpool Community Health NHS Trust (BM/18/31)**

- 5.1. The Chief Executive introduced the report which provided an update on the actions agreed at the Board meeting on 22 March in relation to the Independent review into Liverpool Community Health NHS Trust. The implementation of the actions was on track and papers would be presented to the Board in its private session on Talent Management and Board Appointments.
- 5.2. The interaction between the agreed actions and the joint working programme was acknowledged and it was noted that the closer working between NHS England and NHS Improvement would be helpful in the context of the recommendations in the report. A discussion took place on the role of the CQC and the Board noted that, while this report focused specifically on NHS Improvement's actions, joint work was also ongoing with the CQC particularly in the areas of a national fit and proper person test and on the quality impact assessment of cost improvement plans. It was also noted that a joint oversight group for all arm's length bodies met every other month to discuss known quality issues as well as soft intelligence metrics.
- 5.3. The importance of ensuring all the actions were implemented was highlighted and the Board also emphasised the need to enable NHS Improvement to spot issues earlier. The measures that were being put in place to enable this were outlined and it was noted that further work was needed on gathering better data on non-acute providers. The Board commented on the importance of

triangulating data on staff turnover with grievance data and whistleblowing information.

- 5.4. It was noted that a further update would be provided at the NHS Improvement Board meeting on 26 July 2018.

## **6. Carter review of mental health and community services (BM/18/42)**

- 6.1. Luke Edwards, Director of Sector Development, Operational Productivity, attended the meeting for consideration of this item.
- 6.2. The Board received a report prepared by Lord Carter on unwarranted variations in workforce productivity and utilisation, and the efficient use of resources for non-pay goods and services in the mental health and community services sectors. The report concluded that tackling the operational challenges and removing the unwarranted variation would result in better quality care, a more productive workforce and efficient use of money.
- 6.3. The final review, which was attached to the report, made 16 recommendations to NHS Improvement, providers of NHS mental health and community health services in England, and other national bodies such as NHS England. The recommendations concerned, amongst other things, the approach taken to staff, contracting, technology and delivery.
- 6.4. A discussion took place on the funding model for community care and the potential benefits of including step down care in the acute care funding package were discussed. Consideration was also given to wound care, its costs and the need to develop more efficient pathways for wound care to deliver better patient outcomes.

### **RESOLVED:**

- 6.5. The Board resolved to approve the report's recommendations.

## **7. Freedom to Speak Up Guardians' report (BM/18/32)**

- 7.1. Ulrich Kaltenbronn and John Lodge, Freedom To Speak Up Guardians (FTSUGs), attended the meeting for consideration this item.
- 7.2. The FTSUGs introduced the paper, which provided feedback on the Guardians' first year of work, asked for support and guidance on their future role and aims, and made a number of recommendations for the Board.
- 7.3. The Board noted that four investigations had taken place, and considered the recommendations for further development of the FTUGs' programme at NHS Improvement. The Board commended the hard work that had been put into the development of the programme and the investigations to date. It was noted that

some of the issues raised had been complex and difficult to resolve and the FTSUGs were thanked for their efforts.

- 7.4. The Board highlighted the importance of this work programme for NHS Improvement and expressed its continued support. The importance of ensuring a listening culture within the organization was emphasised.

**RESOLVED:**

- 7.5. The Board resolved to approve the report's recommendations.

**8. Questions and comments from the public**

- 8.1. A member of the public thanked NHS Improvement for its work to date on supporting of whistleblowers and urged the organisation to do more and to move more quickly in relation to the scheme to assist whistleblowers return to work. The Board thanked the member of the public for their comments, accepted this point and undertook to progress it. It was also agreed that lessons could be learned from the financial services sector in this area.

**ACTION: RM**

- 8.2. A member of the public read out a letter previously sent to NHS Improvement, setting out a number of concerns with regard to the NHS care she had received and her subsequent ability to raise issues with this care or to get satisfactory resolution. The Board thanked the member of the public for having the courage to raise these matters and undertook to follow up on the issues outside of the meeting.

**9. Private session – resolution (oral item)**

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

**10. Talent management: a proposed role for NHS Improvement (BM/18/36(P))**

- 10.1. The Chief Executive presented a paper which summarised the current status of talent management in the NHS, and proposed a greater role for NHS Improvement in this area. The paper also set out a high-level structure for a more coherent, system-wide approach to the development and management of top talent in the NHS.

- 10.2. Consideration was given to an appropriate allocation of responsibilities in relation to NHS talent management between national bodies and individual organisations. The importance of a nationally coordinated approach was highlighted but the Board also emphasised that it was important for local

organisations' boards to take responsibility for developing talent. This should be done across all professions.

- 10.3. The need to work together closely with Health Education England and the Leadership Academy was considered and noted. The Board also discussed the need to develop a better leadership development programme for NHS Improvement internally.
- 10.4. A discussion took place on short term measures which would be taken to support leadership development and the need to support new leaders taking on a role for the first time was highlighted. The Board considered the proposed creation of a Chief People Officer role and it was noted that the job description for this role would be considered by the Nominations and Remuneration Committee.

**RESOLVED:**

- 10.5. The Board resolved to agree the objectives for the next six months as set out in the paper, and the early actions to be taken by NHS Improvement.

**11. NHS Improvement's role in appointing and supporting NHS boards (BM/18/37(P))**

- 11.1. The Chief Executive introduced the report which set out proposals for clarifying NHS Improvement's influence on provider boards and their membership. It provided options that would set out NHS Improvement's role at various stages of the 'life cycle' of a board member.
- 11.2. The Board noted that the Chief People Officer, whose job description was being finalised, would be responsible for this area of work. It was likely that consultation would be required on some aspects of NHS Improvement's proposed role.
- 11.3. The Board welcomed the paper and expressed its support for work in this area to continue.

**12. Review of winter 2017/18 (BM/18/38(P))**

- 12.1. Pauline Philip, National Director of Urgent and Emergency Care, attended the meeting for consideration of this item.
- 12.2. The National Director of Urgent and Emergency Care introduced the paper which set out a draft Review of Winter 2017/18 intended for publication in June 2018.
- 12.3. A discussion took place on the lessons learned in relation to capacity planning and the National Director of Urgent and Emergency Care provided an overview of the approach which would be taken for the coming winter. The ongoing

issues associated with bed capacity were considered and measures that were being put in place to free up capacity were discussed. The Board welcomed the increased clarity and understanding with regard to the factors underlying winter performance issues.

- 12.4. Consideration was given to the need to ensure best use was made of surgical care specialists in periods when elective volumes were limited as a result of emergency pressures. The Board also emphasised the need to set clear standards in relation to care being delivered in hospital corridors which was not acceptable and needed to be addressed. A teach-in for the Board on best practice for running emergency departments would be organized for June.

**ACTION: PP/JD**

### **13. Annual report and annual governance statement (BM/18/39(P))**

- 13.1. The Board was invited to provide any comments on the annual report and governance statement to the Head of Governance by Friday 1 June 2018.

### **14. Any other business**

- 14.1. The Chair and the Board thanked Sigurd Reinton, who was leaving at the end of June 2018, for his hard work and valuable contributions during his time as a Non-Executive Director of Monitor and NHS Improvement.

**Close**