

26 June 2017

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By email

Dear

Request under the Freedom of Information Act 2000 (the "FOI Act")

I refer to your email of **27 May 2017** in which you requested information under the FOI Act from NHS Improvement. Since 1 April 2016, Monitor and the NHS Trust Development Authority ("NHS TDA") are operating as an integrated organisation known as NHS Improvement. For the purposes of this decision, NHS Improvement means Monitor and the NHS TDA.

Your request

You made the following request:

"Can you please send me all papers referred to in the Part 2 Board meeting agenda for the meeting on 25 May 2017 (including the papers marked - to follow)."

Decision

NHS Improvement holds the information that you have requested.

NHS Improvement has decided to withhold all of the information that it holds on the basis of the applicability of the exemptions in sections 21, 22, 31 and 36 as explained in detail below.

Section 21 – information accessible by other means

Under section 21 of the FOI Act, information is exempt if it is accessible to the applicant by other means. The Report on the Performance of the NHS Provider Sector Year Ended 31 March 2017 has been published and is available using the link below:

https://improvement.nhs.uk/resources/quarterly-performance-nhs-provider-sector-quarter-4-1617/

Section 22 – information intended for future publication

Section 22 provides an exemption where information is held by a public authority with a view to future publication, if it reasonable to withhold the information from disclosure until the date of publication.

In relation to the NHS Improvement Business Plan 2017-19, and the Draft Annual report and accounts 1 April 2016 to 31 March 2017, this information will shortly be published by NHS Improvement.

Some of the information that you have requested therefore falls within the exemption at s.22 of the FOI Act. This exemption is subject to a public interest test. There is a public interest in understanding the finances of NHS providers and in the remit of NHS Improvement and how it plans to conduct its functions. However, NHS Improvement considers the public interest will be met by future publication of this information and that the balance of the public interest in this case lies in withholding this information and keeping to the proposed timetables for publication.

Section 31 – Law enforcement

Under section 31(1)(g) of the FOI Act, information is exempt from disclosure if its disclosure would, or would be likely to, prejudice the exercise by any public authority of its functions for any of the purposes specified in section 31(2). NHS Improvement considers that section 31(2)(c) is engaged and that disclosure of the some of the information in question would be likely to prejudice the exercise by Monitor and TDA of their functions for the purpose of ascertaining whether circumstances exist which would justify regulatory action in pursuance of an enactment.

The conditions of Monitor's provider licence enable Monitor to regulate the economy, efficiency and effectiveness of NHS foundation trusts under Chapter 3 of Part 3 of the Health and Social Care Act 2012. Section 5 of The National Health Service Trust Development Authority Directions and Revocations and the Revocation of the Imperial College Healthcare National Health Service Trust Directions 2016 provides that the TDA must exercise its functions with the objective of ensuring that English NHS trusts are able to comply with their duty under section 26 of the NHS Act 2006. Section 26 sets out the general duty of NHS trusts to exercise their functions efficiently, economically and effectively.

NHS Improvement considers that disclosing trust names is likely to prejudice the on-going monitoring by NHS Improvement of providers' compliance with the rules, which is necessary for NHS Improvement to take into account in any decision of regulatory action needed in respect of a failure to comply with the rules.

NHS Improvement relies on the full and frank information from trusts in order to carry out its functions effectively. NHS Improvement relies on having a safe space in which providers are freely able to share sensitive and confidential information in the knowledge that the

information will not be disclosed more widely. To disclose that information more widely is likely to have a detrimental impact on the quality and content of exchanges between NHS Improvement and the bodies it regulates and its ability to make effective and fully informed regulatory decisions.

Section 36(2) – prejudice to effective conduct of public affairs

NHS Improvement has decided to withhold the information requested on the basis that some of it falls within section 36(2)(b)(i) and/or (ii) and section 36(2)(c) of the FOI Act (prejudice to the effective conduct of public affairs).

The exemption is engaged as NHS Improvement's qualified person (Jim Mackey, Chief Executive) is of the opinion that disclosure of this information would inhibit the free and frank provision of advice and/or the free and frank exchange of views for the purposes of deliberation (section 36(2)(b)(i) and (ii)).

In order to carry out its statutory functions NHS Improvement must be able to hold free and frank discussions about policy decisions and advise on the same, without concern that the detail of those discussions or that advice will be disclosed. If this material were published, it would restrict the candour and frankness with which similar future discussions would be conducted, as individuals would be concerned about the possibility that those views and discussions would be made public. The result would be to reduce the quality of discussion and advice provided in such cases and an adverse impact on the ability of NHS Improvement to develop effective policy and carry out its functions.

NHS Improvement's qualified person is also of the opinion that disclosure of this information would otherwise prejudice the effective conduct of public affairs. The information being withheld consists of papers for a private session of the Board of NHS Improvement which contain preliminary views and ideas which are not yet the view of NHS Improvement. The private sessions of NHS Improvement's Board provide it with a 'safe space' in which to develop ideas, debate live issues, and reach decisions away from external interference and distraction. Disclosure of the private Board papers would prejudice the 'safe space' created by the use of private Board sessions which would reduce the quality of decision making which, in turn, would prejudice the effective conduct of public affairs. Disclosure of the information would also undermine the principle of holding private sessions of the Board.

Public interest test

This exemption is subject to a public interest test. NHS Improvement's view is that, on balance, the public interest in maintaining the exemption outweighs the public interest in disclosure. In considering the balance, we have considered the public interest in transparency and openness in relation to decisions by public bodies, particularly decisions affecting the NHS.

We have however also considered the strong public interest in NHS Improvement being able to hold free and frank discussions about policy decisions, and advice on those decisions, without concern that the detail of those discussions will be disclosed.

NHS Improvement has also considered the strong public interest in the Board of NHS Improvement having a 'safe space' in which to consider all the advice and views provided to it without concern that those details will be disclosed inappropriately. There is a public interest in preserving the integrity of the private sessions of the Board of NHS Improvement to ensure it is able to have the open and confidential discussions necessary to ensure effective decision making. The public interest lies in sensible, well-considered policies being made, which can only come about when a safe space is provided in which to formulate and develop such policy. By disclosing the private papers and undermining such a 'safe space' for policies to be considered, the quality of future determinations may be impacted, which would not be in the public interest. We have also taken into account that, in relation to the risk that disclosure would prejudice the effective conduct of public affairs, the opinion of NHS Improvement's qualified person was that the prejudice would occur (i.e. it was more probable than not that the prejudice would occur).

Taking into account these considerations, our decision is that the balance of public interest is in withholding this information.

Review rights

If you consider that your request for information has not been properly handled or if you are otherwise dissatisfied with the outcome of your request, you can try to resolve this informally with the person who dealt with your request. If you remain dissatisfied, you may seek an internal review within NHS Improvement of the issue or the decision. A senior member of NHS Improvement's staff, who has not previously been involved with your request, will undertake that review.

If you are dissatisfied with the outcome of any internal review, you may complain to the Information Commissioner for a decision on whether your request for information has been dealt with in accordance with the FOI Act.

A request for an internal review should be submitted in writing to FOI Request Reviews, NHS Improvement, Wellington House, 133-155 Waterloo Road, London SE1 8UG or by email to nhsi.foi@nhs.net.

Publication

Please note that this letter will shortly be published on our website. This is because information disclosed in accordance with the FOI Act is disclosed to the public at large. We will, of course, remove your personal information (e.g. your name and contact details) from the version of the letter published on our website to protect your personal information from general disclosure.

Yours sincerely,

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Jessica Dahlstrom Head of Governance