

MINUTES OF A PUBLIC MEETING IN COMMON OF THE BOARDS OF NHS ENGLAND AND NHS IMPROVEMENT HELD ON THURSDAY 24 MARCH 2022 AT 2 PM BY VIDEO CONFERENCE

Members:	
NHS England Lord David Prior	Chair
Michael Coupe	Non-Executive Director
Lord Ara Darzi of Denham	Non-Executive Director
Rakesh Kapoor	Non-Executive Director
Amanda Pritchard	Chief Executive Officer
Jeremy Townsend	Non-Executive Director
Laura Wade-Gery	Non-Executive Director
NHS Improvement	
Sir Andrew Morris	Chair
Sir David Behan	Associate Non-Executive Director
Lord Patrick Carter of Coles	Non-Executive Director
Wol Kolade	Non-Executive Director
Dame Julia Goodfellow	Non-Executive Director
Professor Sir Munir	Non-Executive Director
Pirmohamed Professor Stephen Powis	Chief Executive Officer, NHS Improvement
	Chief Executive Oncer, NHS improvement
Joint members	
Julian Kelly	Chief Financial Officer
Ruth May	Chief Nursing Officer
Sir David Sloman	Chief Operating Officer
Professor Stephen Powis	National Medical Director
In attendance	
Professor Sir John Bell	Regius Professor of Medicine, University of Oxford,
	and Chairman of the Office for the Strategic
	Coordination of Health Research (for agenda item 8)
Sofia Bernsand	Head of Board Governance
Mark Cubbon	Chief Delivery Officer
Blake Dark	Commercial Medicines Director, NHS England (for agenda item 8)
lan Dodge	National Director for Primary Care, Community
lan Dougo	Services and Strategy
Dr Tim Ferris	Director of Transformation
Professor Peter Johnson	Professor Peter Johnson - National Clinical Director for
	Cancer, NHS England, and Professor of Medical
	Oncology at the University of Southampton (for agenda
	item 8)
Katherine Ibbotson	Director of Governance and Legal
Richard Meddings	Incoming NHS England Chair
Jim Mackey	National Director for Elective Recovery
Clare Perry	Senior Business Manager to the Chairs
Pauline Philip	National Director for Emergency and Elective Care

Dame June RaineChief Executive, Medicines and Healthcare products
Regulatory Agency (MHRA) (for agenda item 8)Dr Sam RobertsChief Executive, National Institute for Health and Care
Excellence (NICE) (for agenda item 8)Jacqui RockChief Commercial OfficerEm Wilkinson-BriceActing Chief People OfficerMatt WhittyDirector of Innovation, Research and Life Sciences,
and Chief Executive (for agenda item 8)

1. Welcome and apologies

1.1. Apologies for absence had been received from Susan Kilsby (Non-Executive Director, NHS England).

2. Declarations of interest

2.1. No declarations of interest were raised over and above those held on record and no conflicts of interest were raised in respect of business covered by the agenda.

3. Minutes from the meetings held on 27 January 2022 (BM/22/06(Pu))

3.1. The minutes from the NHS England and NHS Improvement Board meetings held on 27 January 2022 were approved.

4. Chief Executive's Report (verbal update)

- 4.1. The NHS Chief Executive introduced the item, noting that this was Lord David Prior's last Board meeting as the chair of NHS England and expressed her gratitude to David for his support and tremendous contributions to the organisations and the NHS.
- 4.2. Tribute was paid to colleagues across the NHS for coming together to respond to the situation in Ukraine. Considerable efforts are being made to provide medical supplies and support to health care colleagues in Ukraine, and the NHS is now treating 21 Ukrainian refugee children with cancer at specialist centres around the country. The NHS is also ready to provide initial assessments of care for refugees arriving in England in the coming weeks, and will respond to any further requests from Government to provide health care to additional refugees arriving from Ukraine. Considerable work has also taken place to assess the NHS' exposure to the situation in Ukraine, including supply chain resilience, security and NHS organisations' reliance on energy supplies from Russian companies. The potential implications of inflation in energy costs on NHS budget and on individual patients were also being discussed with the Department of Health and Social Care (DHSC).
- 4.3. The increase in pressures on services in response to the recent increase in COVID-19 infection rates was noted, with the number of patients being admitted to hospital for COVID-19 in some regions exceeding that of last winter. Members of the public were reminded of the offer to those over the age of 75 or those who are

immunosuppressed to come forward and book their COVID-19 spring booster vaccine.

- 4.4. The Boards noted that the delivery plan for tackling the COVID-19 elective backlog had been published in February, setting out a progressive agenda for how the NHS will recover elective care over the next three years.
- 4.5 The Chief Executive provided an overview of some of the new test and treatment devices that will be made available to the NHS through the recently published MedTeach Funding Mandate for 2022/23. Over the last two months a number of new treatments have also been made available to patients.
- 4.5. The Chief Executive reported that extensive engagement is taking place with the DHSC over the Secretary of State's reform agenda, including how it supports the direction of travel of the NHS Long Term Plan and Health and Care Bill. There is alignment with Government over supporting providers to collaborate in the provision and improvement of services over a wider footprint. Board members noted that NHS England/NHS Improvement will engage with local leaders to ensure full use of the freedoms and flexibilities provided by the Health and Care Bill.
- 4.6. In response to Government's 'Living With COVID' plan to maintain a baseline COVID testing infrastructure within existing departmental spending allocations, discussions were being held with DSHC and HM Treasury to assess the impact this will have on NHS-managed budgets for 2022/23 and patients.
- 4.7. The Chief Executive highlighted the ongoing challenges around the quality of care of maternity and neonatal services, noting that the final report on the Ockenden review of maternity services at Shrewsbury and Telford Hospital NHS Trust (the Ockenden review) was due imminently. The Boards noted that improving maternity and neonatal services remain a key priority for the NHS and that an additional £127 million of funding to advance maternity services across England has been agreed, and will be deployed to transform care for pregnant women and their babies.
- 4.8. The Chief Nursing Officer thanked Donna Ockenden for her review and each of the families who, under extremely difficult circumstances, have come forward and shared their concerns. The Boards noted that the additional funding will be used to improve maternity workforce capacity, improve the quality and safety of care across maternity and neonatal services, invest in local maternity systems to address culture challenges, and support staff with improved training and development. The improvement in data collection will support earlier identification of trusts that requires additional support. An update on the work underway with Health Education England on recruitment and retention of midwifery and obstetrician posts was provided..

5. NHS operational performance update (BM/22/07(Pu))

5.1. The Chief Operating Officer introduced the report, highlighting the increase in the number of patients being admitted to hospital for COVID-19 in the last three weeks. An update on elective recovery was provided, noting that many systems

have been able to maintain elective recovery capacity and performance during the latest wave of COVID-19 infections.

- 5.2. The continued significant pressures on urgent and emergency pathways and ambulance service capacity were considered, and an overview of initiatives to support those trusts with the most significant ambulance handover delays was provided. The Boards noted that all systems have been asked to produce individual system plans, detailing how they will collectively share and manage the continued clinical risks facing services within their system, ensure effective discharge from accident and emergency, and ensure weekend discharge performance is adhered to. Trust boards have also been requested to regularly review data associated with category 1 and 2 performance, overall trust performance, and ensure they respond accordingly. The Boards welcomed these key initiatives, and a discussion took place on hospital aid, the interface between the NHS and the social care sector, and between primary and secondary care.
- 5.3. A discussion took place on the continuing challenges on mental health capacity, both for adult and children and young adult services. The Boards agreed that a more in-depth review of initiatives, to meet current and anticipated future increase in demand for mental health services should be presented to the next meeting. ACTION: DS
- 5.4. The Chief Financial Officer provided a high-level summary of the financial position across the NHS as at month 10 of 2021/22, highlighting the forecasted underspend for 2021/22.
- 5.5. The Boards noted that in response to the Government's 'Living With COVID' plan, the DHSC has requested that NHS budgets are reduced by approximately £500 million to meet ongoing costs of living with COVID-19, including the cost of the public health policy around Test and Trace. The rise in inflation rate could potentially amount to further financial pressures of up to £1 billion. Considerable work is taking place to establish what impact this will have on the delivery of transformation programmes and ambitions set out in the NHS Long Term Plan, and on developing plans to appropriately manage these additional pressures.
- 5.6. The Boards discussed the impact of the reduction of central funding for the Hospital Discharge programme, noting the likely effect this will have on patient flow in hospitals and transfer of patients to the social care sector. It was also noted that the Government had doubled the NHS's annual efficiency target to 2.2%.

6. Elective Recovery Programme (BM/22/08(Pu))

- 6.1. The National Director for Elective Recovery introduced the item and provided an overview of progress made in addressing the backlog of elective care.
- 6.2. Considerable work is also taking place to ensure long term sustainable recovery of elective care, including improving outpatient flow and providing patients with choices that better meet their individual need.
- 6.3. Tribute was paid to colleagues across the system for managing, to the extent possible, to maintain access to elective care during another winter of

unprecedented pressure and challenges. In the last couple of months, considerable progress has also been made to address those who have been waiting 104 weeks or longer. Additional support is being given to providers who are finding it particularly challenging to maintain activity levels.

7. Health and Care Bill update (BM/22/09(Pu))

7.1. The National Director for Primary Care, Community Services and Strategy introduced the item and provided an update on the development of the Health and Care Bill (the Bill). The recommendations made by organisations in 2019 have now been agreed by both Houses and the readings in the House of Lords has resulted in significant improvements to the Bill in a number of areas.

8. Update on Life Sciences: Future of Life Sciences in the NHS (BM/22/10(Pr))

- 8.1. The Chair of NHS England introduced the item and welcomed the guest speakers. The National Director of Transformation provided an overview of the context and the underlying principles to life sciences in the NHS, highlighting the key role that the NHS has in the future health and care needs of the population. In close collaboration with partners (including the Government, regulatory, charity, and industry partners), the NHS will lead on innovations and transformations that will ensure that NHS services best meet the needs of patients when required and prevent longer term morbidity and mortality.
- 8.2. Lord Ara Darzi, as the chair of Accelerated Access Collaborative (AAC) and a member of the NHS England Board, reflected on Lord David Prior's time as NHS England chair and highlighted the opportunities that the NHS has in creating value out of science, both from health and economic perspectives.
- 8.3. Professor Sir John Bell, Regius Professor of Medicine, University of Oxford, provided an overview of the context to the life sciences programme in the UK.
- 8.4. Matt Whitty, the Chief Executive of the AAC, provided an update of the work of the AAC and a summary of AAC's five priority areas in the next two years.
- 8.5. Blake Dark, the Commercial Medicines Director, NHS England, provided an overview of work that has taken place with partners to provide early access deals to new medicines and treatments.
- 8.6. Dame June Raine, the Chief Executive of Medicines and Healthcare products Regulatory Agency (MHRA), highlighted MHRA's role in accelerating access to new innovative products, ensuring safety for patients and supporting the progression of clinical trials.
- 8.7. Dr Sam Roberts, Chief Executive of National Institute for Health and Care Excellence (NICE) provided an overview of NICE's role in health technology developments to ensure the best outcome for patients and value for money.
- 8.8. Professor Peter Johnson, the National Clinical Director for Cancer, provided a high-level summary of some of the innovations and technologies introduced in relation to diagnosis and treatments of cancer.

- 8.9. A discussion took place on the role that genomics will play in longer-term health prevention and improvements that NHS England/NHS Improvement can make to accelerate the introduction of new innovations and technologies to the NHS.
- 8.10. Board members discussed the important role that Integrated Care Boards (ICBs) will have in bringing together system and supporting greater provider collaboratives. This will need to be supported by appropriate leadership and capacity for clinicians to take this agenda forward.
- 8.11. The Chief Executive concluded the discussions and highlighted the importance of ensuring that life sciences meet the health needs of the population today and in the future, the need for continued close collaboration with partners, and for the NHS to be agile in their approach to innovation and technology. The Chair of NHS England thanked the guests and NHS colleagues for their dedication to furthering the life science agenda.

9. Presenting of NHS England, Monitor and NHS TDA 2020/21 annual report and accounts (BM/22/11(Pu))

9.1. The Boards noted the reports, which confirmed the laying of the 2020/21 Annual Reports and Accounts for NHS England, NHS Trust Development Authority and Monitor.

10. NHS England and NHS improvement Slavery and Human Trafficking Statement for 2022/23 (BM/22/12(Pu))

10.1. The Boards noted and approved the 2022/23 Slavery and Human Trafficking statement for publication on the NHS England/Improvement website.

11. Annual Emergency Preparedness, Resilience and Response (EPRR) Assurance Report (BM/22/13(Pu))

11.1. The Boards endorsed the report.

12. Use of the NHS England Seal (BM/22/14(Pu))

12.1. The Boards noted the report which set out details of all documents that have been authorised and sealed with the NHS England seal, between 1 January to 31 December 2021.

13. Any other business

13.1. The incoming chair, Richard Meddings, thanked Lord David Prior for his stewardship during his tenure as chair of NHS England and thanked him for his support in introducing him to the role as the chair of NHS England.

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