

## BOARD PAPER - NHS ENGLAND

**Title:** Chief Executive's report

**By:** Simon Stevens, CEO

**Purpose of paper:**

- Update on the work of the Chief Executive over the last month
- Information on a number of NHS England priorities not covered elsewhere on the agenda.

**Actions required by Board Members:**

- To note, and to discuss various items referred to herein.

## **Chief Executive's Board report, January 2016**

### **Winter**

Deep thanks go to staff across the NHS who worked tirelessly throughout the holiday period, including of course nights, bank holidays and weekends. As has been widely observed, the NHS was very busy, but generally had a less pressurised Christmas/New Year period than last year. This was likely due to a combination of improved preparedness, strong joint working between NHS England and NHS Improvement (NHSI), lower incidence of flu, a flu jab that worked better, milder weather, and more bed availability, all underpinned by stronger operational effectiveness in an increasing number - but not all - trusts and local health systems. I saw this first hand on my visit on New Year's Eve to Great Western Hospital A&E in Swindon.

With NHSI, we are conducting a review of what worked and what hasn't, to inform the approach for next winter. One area for improvement needs to be the flu vaccination rate, including of NHS staff. On a side note, we were all delighted to support and celebrate the success of the NHS Choir in its chart topping hit, displacing even the true Beliebers over the Christmas period.

### **15/16 year end and 16/17 commissioning round**

Paul Baumann will report on the work under way across the NHS to support DH achieve the best possible year-end financial position, and as importantly the NHS' run rate going into 16/17. Paragraph 3.8 of his board report sets out our contribution. NHSI and the Care Quality Commission are working together to ensure consistency of approach regarding needed cuts in temporary staffing costs and other critical provider savings.

Since our last Board meeting we have issued the 16/17 NHS planning guidance, as well as CCG-specific allocations. Within the next few weeks we will be issuing the tariff Section 118 consultation (jointly with NHSI), the proposed 16/17 standard contract, and next year's national CQUIN incentives. We will also be jointly agreeing individual provider performance trajectories with NHSI in order that we can release the first shares of the 16/17 £1.8bn 'sustainability' funding that the NHS England Board agreed at our December meeting to allocate to relevant providers via CCGs.

Operational plans for next year need to link to - and comprise Year One of - the Sustainability and Transformation Plans (STPs) that each geography across the country will be developing by June. STPs are of course just means to ends - the real world impact being improved community health and control, allied to better care especially in areas such as mental health, cancer and long term conditions. Geographical footprints will be finalised next week, with milestones and national check-ins to be scheduled for April and July.

## **Major upcoming developments**

*Primary care.* Following the outcome of the Spending Review, we expect to be able to announce in February a substantial and wide ranging programme of funding and support for GPs and primary care. This will include measures on workforce, workload and service redesign. Constructive negotiations on the 2016/17 general medical services contract are well advanced with the BMA's General Practitioners Committee, recognising that the February GP package will go much further than any one year's contract can in helping GPs with the real pressures they face. I discussed some of these with the Public Accounts Committee on 11th January.

*Mental health.* NHS England's independent taskforce set out some of its core recommendations earlier this month, and I publicly committed the NHS to the funding to deliver these, with a particular initial focus on maternal and child mental health, and mental health crisis care. I took the opportunity on a recent visit to South London and the Maudsley mental health trust to discuss some of the implementation priorities for strengthened mental health services, and met young people and their parents to hear about their experiences and suggestions. The Taskforce's final report is expected to be published within the next month.

*Maternity services.* Baroness Julia Cumberledge and her independent panel will be launching their taskforce report in February, setting out a range of measures to improve the quality and responsiveness of maternity care.

*Childhood obesity.* The Government is finalising its national childhood obesity strategy. We are helping lead on the contribution the NHS can make, including an NHS "sugar tax", restrictions on junk food, improved support for patients and parents, and changes to the food environment for our staff, visitors and inpatients.

*Technology.* I launched the NHS' so-called innovation 'test beds' combining tech, informatics, and integrated care at Davos last week. Following the departure of Tim Kelsey we're now recruiting for our new NHS Chief Information and Technology Officer (CITO). NHS England is also supporting a short review of how to speed up clinical technology adoption by Dr Bob Wachter and colleagues.

## **Junior doctors**

While NHS Employers and the Department of Health have responsibility for these pay negotiations, under the Civil Contingencies Act and the NHS Health and Social Care Act it statutorily falls to NHS England to assume operational command of the NHS at times of industrial action or other major service disruption.

Under Bruce Keogh's and Anne Rainsberry's leadership, successful action was therefore taken in partnership with trusts and NHSI to ensure frontline preparedness for the January strike, and threatened further strikes. Concerns remain about the effect on patient care of either multiple days of further cancelled outpatients and operations, or the withdrawal of emergency cover. We therefore welcome the transfer of contract negotiating responsibilities to Sir David Dalton, chief executive of Salford hospitals, on behalf of hospitals and other NHS employers. If he is unable to

get a fair agreement with the BMA that works for both sides, it's not obvious that anyone can.

### **Staff and partner recognition**

I'd like to add our public congratulations to all those recognised in the New Year's Honours, including these individuals associated with the work of NHS England: Dr Geraldine Strathdee, our national clinical director for mental health; Harpal Kumar, chair of our independent cancer taskforce; Paul Farmer, chair of our independent mental health taskforce; Professor Keith Willett, our national clinical director for emergency care; and Stephen Groves, our national head of emergency preparedness.

The relevant health honours committees continue to welcome well evidenced nominations for public recognition of the many diverse individuals performing outstanding public service in the health professions, related voluntary organisations, and NHS leadership.

### **Urgent governance action since last Board meeting**

Since the last meeting we needed to make an amendment to our scheme of delegation to reflect changes in organisational accountabilities. Details are in the annex to this report.

**Simon Stevens**  
**Chief Executive**

## Annex

Name of urgent action	Lead National Director	Overview	Details	Board members approved	Date to be reported to Board
Amendments to the Reservation of Powers to the Board and Delegation of Powers	Karen Wheeler, National Director: Transformation and Corporate Operations	Changes to the National Director and VSM structure within NHS England have necessitated a n amendment to the scheme of delegation.	<p>Following publication of the updated SFIs, feedback was received from a number of teams within NHS England which required an urgent amendment to the Standing Financial Instructions (SFIs). Due to an omission, some delegated limits under non-clinical non-pay contract approvals required reinstating.</p> <p>The changes affect SFI 13.27.2 and relate to the approval limits below £200,000 that were granted to the Very Senior Managers and Regional Directors.</p>	<p>Professor Sir Malcolm Grant (Chairman) Simon Stevens (Chief Executive Officer) David Roberts, Non-Executive Director Noel Gordon, Non-Executive Director</p>	28 January 2016