

Minutes

Title of meeting	NHS Improvement (NHSI) Q2 Ministerial Accountability Meeting	
Date	20 December 2017	Time 9:30 am
Venue	Victoria Street Room 91	
Chair	Philip Dunne, Minister of State for Health	
Secretary	Amit Bose	
Attendees	Philip Dunne, Minister of State for Health (MS(H)) Lee McDonough, Director of Acute Care and Workforce (LM) William Vineall, Director of Acute Care and Quality (WV) Jason Yiannikkou, Deputy Director of Provider Policy (JY) Ashley Noriega, Assistant Private Secretary to Phillip Dunne (AN)	
	Attendees – NHS Improvement Dido Harding, NHS Improvement Chair (DH) Ian Dalton, NHS Improvement Chief Executive (ID) Robin Firth, Senior Adviser to the Chair and CEO (RF)	

1. Introduction

MS(H) welcomed Dido Harding(DH) and Ian Dalton (ID) to the meeting adding that a lot is covered in the Monday meetings with Secretary of State and that he would like to use these meetings to find out how NHS Improvement as an entity is operating.

2. Senior Management Structure

a) Board Composition

DH outlined her plans for ensuring NHS Improvement had the right capacity and capability in its Non-Executive Directors and would be recruiting to fill some vacancies.

b) Executive Structure

ID noted that he would be working with his senior team and others to develop and clarify NHS Improvement's operating model. MS(H) said he was very supportive of this and would be keen to keep in touch with the work.

3. Accountability

a) Remit-setting process

The 2017/18 Remit Letter had now been issued. MS(H) noted that for 2018/19 the aim was to ensure as much integration with the mandate setting process as possible.

b) Range of levers/ interventions

ID noted that NHS Improvement has a range of powers and not just those of a regulator. Some of the less direct powers could often be more effective than regulatory ones.

4. Organisational Capacity

DH said that introducing a Chief Operating Officer role is beginning to demonstrate real benefits. Further work to integrate and streamline NHS Improvement's activity was under way.

ID said that a lot of work has gone in to mapping how best to support the most challenged Trusts and he would share who is going to be doing what with the most challenged Trusts in the new year.

5. Conclusion

MS(H) thanked DH, ID and their teams in NHS Improvement for their continued hard work on behalf of patients and the NHS.