

**NHS Commissioning Board  
Accountability Meeting**

**Tuesday 12 March 2013**

**16:30-17:15**

**MINUTES**

<b>Department of Health</b>
Rt Hon Jeremy Hunt MP, Secretary of State for Health
Una O'Brien CB, Permanent Secretary
Ian Dodge, Director, NHS Policy and Outcomes
Sam Lister, Director, Communications
Assistant Private Secretary to the Secretary of State
<b>NHS Commissioning Board</b>
Professor Malcolm Grant, Chair
Sir David Nicholson, Chief Executive
Bill McCarthy, National Director: Policy
Tom Easterling, Director, Office of the Chair and Chief Executive

Welcome

1. THE SECRETARY OF STATE welcomed colleagues from the NHS Commissioning Board (NHSCB) to the meeting.

NHSCB Readiness

2. PROFESSOR MALCOLM GRANT outlined that the NHSCB is well-prepared for what is a significant period of transition. The NHSCB plays a key role in the vision for a modern health service which secures the best possible health outcomes for patients by prioritising them in every decision it makes. The first few months in particular will be crucial, and the Board's focus will initially be on developing the right internal culture.
3. SIR DAVID NICHOLSON set out the extent of the people transition. Crucial tasks remaining include successfully exiting those leaving the commissioning system before April, and also processing and confirming staff appointments across the NHSCB and Commissioning Support Units (CSUs). He explained that they have contingencies in place to ensure the transition runs as smoothly as possible.
4. THE SECRETARY OF STATE suggested that, in view of the NHSCB's new public facing role, it might be helpful for the NHSCB to take a strategic look at their communications across the next 12 months.
5. THE SECRETARY OF STATE appreciated the progress already made further work underway on financial readiness and supporting parliamentary business. PROFESSOR

MALCOLM GRANT added that the board-to-board meetings between NHSCB and the Department of Health (DH) are very useful.

### Response to Francis

6. THE SECRETARY OF STATE thanked the NHS CB for their input to the development of the system wide response to Robert Francis' report, due for publication shortly. THE SECRETARY OF STATE explained that the Department would not be responding to all 290 recommendations individually, but would instead respond to the overarching findings of Robert Francis' report.
7. Specifically on reducing bureaucracy, THE SECRETARY OF STATE is keen to reduce burdensome data collection processes, and to channel all processes instead through the Health and Social Care Information Centre (HSCIC).
8. Continuing, he added that he wanted the HSCIC to have an obligation to reduce the burden of data collection. To ensure that the HSCIC becomes the central place for data collections, THE SECRETARY OF STATE also asked the NHSCB to consider his preference for a single electronic system, hosted by the HSCIC.
9. THE SECRETARY OF STATE also proposed that the use of standardised quality accounts, drawn from core comparable data, would reduce the number of times clinicians need to log and record data. SIR DAVID NICHOLSON shared this view.
10. BILL MCCARTHY emphasised that the Francis Report must be acted upon in a way to ensure alignment and togetherness, rather than fragmentation. THE SECRETARY OF STATE agreed and added that his preference was to ensure that any regulation and inspection would look at services in the round.
11. SIR DAVID NICHOLSON stressed that one of the key reasons why he felt that the system of star ratings, operated by the Healthcare Commission, ultimately lost credibility was because of a lack of local engagement and support. The system did not sufficiently recognise local opinion, instead focussing on national conversations to the detriment of local prioritisation.
12. Continuing, he explained that the NHSCB has been through a similar process to find the right balance between national and local interests with Clinical Commissioning Groups (CCGs). There is a tendency for national issues to crowd out local ones, and it is therefore imperative that local engagement is mandated in any new rating system, and that organisations' responsiveness to local opinion is measured.
13. THE SECRETARY OF STATE shared this view, and added that he would like patient safety and patient experience to have significant weighting in any new system and the

consultation on the new system would need to be mindful of the lessons of the past and those set out in the Nuffield Review.

#### Progress on the Mandate commitments

14. THE SECRETARY OF STATE asked for an update on NHSCB progress against his priorities as set out in the Mandate.
15. BILL MCCARTHY explained that significant preparatory work had been undertaken, and that it was being drawn together in the NHSCB's business plan. The business plan will have a clear list of commitments as an annex, designed to drive implementation.
16. SIR DAVID NICHOLSON added that CCGs were currently going through their own planning processes, and that the NHSCB was offering support and strategic advice where appropriate.
17. THE SECRETARY OF STATE took the opportunity to emphasise that he had been pleased with the system's sustained performance on meeting access standards during most of the transition period.
18. Continuing, THE SECRETARY OF STATE outlined that he envisaged access standards remaining an important measure, among others, for the new Chief Inspector of Hospitals.

#### NHS England

19. PROFESSOR MALCOLM GRANT raised the proposal that the NHS Commissioning Board adopt the name "NHS England". The purpose of the change of name would be to ensure that NHS staff, patients and the public understood the new organisation and the scope of its role and responsibilities. The name NHS England would ensure greater clarity about the role of the NHS Commissioning Board – as the organisation responsible for allocating the NHS budget and delivering on the objectives set out in the Mandate. THE SECRETARY OF STATE agreed that the new name would be clearer, and that it did not signify any change in government policy or of the status or powers of the organisation.

#### Future agenda items

20. For the next meeting, THE SECRETARY OF STATE asked that NHSCB colleagues prepare an update on how the NHSCB and CCGs are progressing. Each quarter there would be an in depth analysis and conversation about progress across the mandate.

#### Concluding remarks

21. In conclusion, THE SECRETARY OF STATE welcomed the good working relationships between the Department and the NHSCB, and that he is confident this will continue for the benefit of patients.