



# Department of Health

## Minutes

<b>Title of meeting</b>	NHS Improvement (NHSI) Q3 Accountability Meeting		
<b>Date</b>	28 February 2017	<b>Time</b>	11:30 am
<b>Venue</b>	Richmond House 537		
<b>Chair</b>	Lee McDonough, Director of Acute Care and Workforce (LM)	<b>Secretary</b>	Douglas Hamilton
<b>Attendees</b>	William Vineall, Director of Acute Care and Quality (WV) Jason Yiannikou, Deputy Director of Provider Policy (JY) Douglas Hamilton, NHS Improvement Sponsor (DH)		

### Attendees – NHSI

Jim Mackey, NHS Improvement Chief Executive (JM)]

Robin Firth (RF), Senior Advisor to CEO

### **Item 1 – NHS Providers financial position / Recent Progress / Planning Round 17/18**

LM welcomed JM and RF to the meeting and asked JM to discuss the current financial position of the provider sector and the likely position at year end. JM said that operational pressure had slightly eased during M10 and that forecast outturn was still achievable. LM asked about how the planning round for 17/18 was progressing. JM said NHSI were assessing the plans submitted by trusts and working with them to strengthen where necessary. LM and JM agreed that it was important to establish that the operational productivity savings to be released by the implementation of the Carter Review would be taken into account when forecasting for 17/18.

### **Item 2 – Business planning / end of year accounting**

LM noted that a draft of the Department's 17/18 objectives for NHSI had been shared in order to assist business planning. JM said that NHSI's internal business planning was progressing well. LM asked how the organisation was going to approach the production of its annual report and accounts given that it was comprised of two organisations that continue to exist. JM confirmed that there would be an annual report and set of accounts would be produced for both subsidiary organisations.

### **Item 3 – Workforce**

LM made the point that the health system has a shared interest in working well together to make sure it has the right workforce in place to deliver against its objectives through the Ministerial Working Group. JM agreed that co-ordinated work was vital and said that NHSI were enthusiastic about the difference the working group could make to setting strategic direction.

### **Item 4 – Maternity Function Transfer**

LM thanked JM for the productive joint working NHSI had been doing with the Department on promoting good practice for safer care work stream of the Maternity Transformation Programme. LM noted that responsibility for this work would soon transfer to NHSI and asked for assurance that sufficient resource would be available to insure its successful delivery. JM offered such assurances.

### **Item 5 – Cost Recovery**

LM noted that work currently being carried out by the Department's Overseas Visitor and Migrant Cost Recovery team to deliver the Government's commitment to recover up to £500 million a year from overseas visitors and migrants would also be transferring to NHSI and asked whether NHSI were ready for this further transfer. JM assure LM that he would make sure that the transfer would work smoothly.

### **Item 6 – AOB**

There was no other business.

### **Item 7 – Conclusion**

LM thanked JM and the teams in NHS Improvement for their continued hard work on behalf of patients and the NHS.