

SUMMARY OF BOARD PAPERS – STATUTORY BODIES

CARE QUALITY COMMISSION – 20 JUNE

For more detail on any of the issues outlined in this summary, the board papers for this meeting are available [here](#).

Chief executive's report

- Further to the review of the Care Quality Commission's (CQC) inspection report timeliness, the delivery plan for improvement will be in place from this month.
 - The CQC's 2017/18 business plan commits to publish 90% of inspection reports within 50 working days (65 for hospital reports with three or more core services).
- During the regulator's inspections of the NHS trust and private hospitals where Ian Paterson worked the CQC have looked in detail at whether lessons have been learned to reduce the risk of reoccurrence.
 - The CQC have also incorporated learning from these inspections into subsequent inspections.
 - The CQC are also looking at lessons that can be learned in terms of sharing information between regulators.
- David Behan updated the board on the CQC's digital strategy. Key gaps in the capability and capacity of the strategy have been identified and operational and financial governance arrangements are being developed to provide assurance that investments are well managed and create value.
- The CQC have been working with the Department of Health (DH) on changes to the regulator's performance assessment regulations. This will enable the CQC to: rate more services; ensure parity of approach between NHS and private providers; ensure that in the future the CQC are able to rate services as parliament intended regardless of changes in the health and social care landscape.
 - These changes will bring most of the independent sector into rating. The DH will be consulting on this from 27 June to 25 July. Subject to the consultation, regulations would come into force from October 2017.
- Read our [On the day briefing](#) which summarises the CQC's response and conclusions to its previous consultation on the next phase for regulating NHS trusts. The briefing also summarises the regulator's proposals contained in their new consultation some of which apply to all regulated sectors.
- The CQC has published a report on [driving improvement in acute hospitals](#). Eight trusts share their story of how their improvement had been achieved. Common themes included: the capability and visibility of leaders; shared visions and values; and engagement with staff. This work will be extended to other sectors.

Regulatory governance committee annual report

- The main issues facing ambulance services identified from the sector's inspection programme were: inadequate staff numbers and retention challenges; rising demand; and leadership and management issues.
- The three 'most significant' issues raised through the CQC's internal audit report on inspection ratings were: the threshold between a 'requires improvement' and 'good' rating; the significant number of services rated 'good' for caring; and the complexity of the reporting environment within which the CQC operates. The committee was assured that the action plan answering to the report addressed the right areas.
- The committee has noted and will keep under review the challenges facing the CQC around reduced resources, the increasing use of new technology in health and social care and the importance of successful implementation of CQC's developing digital strategy.

HEALTH EDUCATION ENGLAND – 20 JUNE

For more detail on any of the issues outlined in this summary, the board papers for this meeting are available [here](#).

Finance report: performance report

- 2016/17 has been a challenging year for NHS apprenticeships due to employers deferring apprenticeship starts in anticipation of the introduction of the levy (which also reduced Health Education England (HEE) budgets supporting apprenticeships) and new statutory public sector targets in April 2017.
- The 2016/17 outturn for the NHS apprenticeship starts and new role trainee starts supported and funded by HEE totalled 16,453. This, alongside the increasing number of apprenticeship standards now being developed indicates that the model will continue to be adopted by the NHS and is key to staff training and development.
- HEE has met 90% of the planned return to nursing practice commissions. The Nursing & Midwifery Council call to action letter to ex-registrants to return to nursing practice has generated significant interest across the country.
 - Pilots are developing mentorship infrastructures to support return placements, pastoral and preceptorship work streams.
 - The 2017/18 programme will include return to practice for allied health professionals.
- The refreshed [HEE Quality Framework for 2017/18](#) has now been published.
 - HEE's quality teams will continue to build upon the framework as a multi-professional diagnostic tool in order to support HEE in engaging with system partners and provide targeted and bespoke support to providers.
 - The quality team will also establish a HEE Quality Dashboard to underpin and evidence the framework, and continue to develop and launch a National Education and Training Survey.

Corporate risk register

- There has been a reduction in the risk scoring and RAG rating relating to GP recruitment as good progress continues to be: Q4 2016/17 saw the highest ever levels of GP speciality recruitment, at a total of 3,019.
- HEE currently has one 'red risk' which is related to the Leadership Academy not being able to meet the necessary talent management requirements for the NHS. There are a number of mitigating actions being undertaken to manage this risk, including a pilot talent management programme in the Midlands and East.
- Not having the necessary data to adequately support workforce planning and thus to meet the recommendations of the National Audit Office report's single data collection was also identified as a significant risk. Actions to address this risk include refinement of the annual workforce planning process to increase standardisation and comparability nationally and data sharing arrangements with other organisations.

Patient Advisory Forum update

- To deliver HEE's equality, diversity and inclusion (EDI) agenda a new accountability structure is being established this year. This EDI committee will be established as a sub-committee of the board, supported by four regional 'Advancing HEE's Equality and Diversity' groups through which HEE staff will be invited to engage in the agenda.
- HEE and the Patient Advisory Forum are developing a best practice 'Patient and Public Involvement toolkit' aimed at delivering an interactive 'how to' guide for providers of nurse education.

Additional items

- HEE's board were presented the final year 1 independent [evaluation report](#) of the accelerated training pilot for non-medical endoscopists. This report is intended to be read by those who have an interest in healthcare improvement and the introduction and training of new specialist roles in the healthcare system.