

Chairpersons Report

Chairpersons Name	Jon Lloyd		
Committee Name	Finance & Investment Committee		
Date of Meeting	20.06.17		
Name of Receiving Committee	Trust Board		
Date of Receiving Committee meeting	June 2017		
Strategic Items for referral to Trust Board	No		
Items for escalation?	Yes	No x	If yes, to which Committee

Please detail up to 3 key successes or achievements discussed at the meeting

1. The achievement of zero serious harms in the month of May
2. The management of the cyber-attack and the minimal disruption to patients
3. The successes of the integrated discharge team
4. The positive NHS Improvement visit with regard to CIP plans

Details of the top three risks identified during the course of the meeting and initials of primary member of staff actioning

1.	The financial position in the month of May	RF
2.	Financial performance of the Specialist Services division	RF / MF
3.	CIP achievement, particularly recurrently	RF / RM
4.	Concerns around the appropriateness of the tariff for complex revision cases	RF / MF
5.	The increasing number of young mental health patients	MF

Attendance at the meeting (please highlight):	Excellent (well attended) x	Acceptable (some apologies)	Unacceptable (quorate)	Unacceptable (not quorate)
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Was the agenda fit for purpose and reflective of the Committees terms of reference?	Yes
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Narrative report of the key issues of the meeting

Operational performance for the month was positive with the Trust meeting all National Access targets. Despite the cyber attack only 7 patients (who were not put at risk) had been cancelled. A&E achieved the 90% trajectory despite a growth in admission of young people with mental health problems and a significant number of out of area patients. We remained the 2nd best performing A&E in GM. On the down side patient survey scores for "involvement in discharge" had reduced significantly in the month. There had been zero serious harms in the month.

It had been a poor month financially £800k away from plan in month and YTD. Trust reporting £3.9 million deficit YTD, although cash remains strong due to higher than budgeted opening position. Disappointingly, CIP had under achieved YTD £400k from plan. Despite this it is expected S&T funding will be achieved for the first quarter.

All big 12 schemes are now advancing and the divisional CIP required in addition has been confirmed at £4m to achieve year end target of £14m.

There was a very full and constructive discussion around the BAF targets monitored by our committee. All agreed that the new BAF documentation enabled sound and robust debate and decisions to be made.

Chairman: Robert Armstrong

Chief Executive: Andrew Foster CBE

Reviewed December 2016, next review December 2017

The committee received and noted a very useful paper setting out details of elective T&O current and potential market share.

Key outcomes from the reports taken at the meeting

All key outcomes are clearly identified in the report above and the clear and concise minutes.

Agreed actions from the meeting

Name of primary lead for the actions

Divisional performance presentations to be arranged for future Committee meetings

Trust Board Secretary Office

Specialist Services to be asked to attend the next Committee meeting to provide analysis around their performance

Director of Operations and Performance

PRIVATE & CONFIDENTIAL

Minutes of a meeting of the Finance and Investment Committee held at 9.30am on 20 June 2017 in the Boardroom, Trust HQ

		2017										
PRESENT		17 01	14 02	21 03	25 04	23 05	20 06					
Mr Robert Armstrong	Chairman	√	√	√	A	√	√					
Mr Rob Forster	Director of Finance	√	√	√	√	√	√					
Mr Andrew Foster	Chief Executive	A	√	√	√	√	√					
Dr Sanjay Arya	Medical Director	√	AA	√	√	√	MF					
Mr Neil Turner	Non-Executive Director	√	√	A	√	√	√					
Mrs Pauline Law	Director of Nursing	√	AE	√	√	√	√					
Mr Neil Campbell	Non-Executive Director	√	A	√	√	A	√					
Mr Richard Mundon	Director of Strategy	√	√	√	√	√	√					
Mrs Alison Balson	Director of Workforce	√	VM	√	√	√	√					
Mr Jon Lloyd	Non-Executive Director (Chair)	√	√	√	√	√	√					
Mrs Mary Fleming	Director of Performance and Operations	DA/ RL	√	√	√	√	√					
Mrs Carole Hudson	Non-Executive Director	√	√	√	√	√	√					
Mr Mick Guymmer	Non-Executive Director	√	√	√	√	√	A					
IN ATTENDANCE												
Mr David Evans	Associate Director of Estates and Facilities	√	√	√	√	√	√					
Mrs Lynda Hancock	Corporate Services Administrator	√	√	√	√	√	√					
Mr David Hughes	Associate Director of Finance						√					
Mr Mark Singleton	Acting Associate Director of IM&T	-	√	GH	√	√	√					
Mr Paul Howard	Trust Board Secretary						√					

Key: √: attended | A: apologies sent | ×: did not attend

1. CHAIRMAN'S OPENING REMARKS

The Chair welcomed all to the meeting and introduced the Trust Board Secretary to his first meeting of the Finance & Investment Committee. It was noted that an additional paper around Trauma and Orthopaedics market share would be taken under the 'Any Other Business' item.

2. DECLARATION OF INTERESTS

There were no declarations of interest declared.

3. APOLOGIES FOR ABSENCE

Apologies for absence were received as indicated in the attendance record.

4. MINUTES OF THE LAST MEETING 23.05.17

The minutes of the Finance and Investment Committee held on the 23rd May 2017 were agreed to be a true and accurate record.

5. MATTERS ARISING

a. Actions from the last meeting 23.05.17

The action log from the Finance and Investment Committee meeting held on 23rd May 2017 was received and the completed action updates noted.

b. Work plan 17/18

The Committee work plan was received and noted.

It was agreed that presentations from divisions with regard to performance year to date would be scheduled for future meetings of the Committee, commencing with a presentation from Specialist Services at the July meeting.

ACTION: Trust Board Secretary Office

6. RISK ESCALATIONS

There were no formal risk escalations for report to the Committee.

7. PERFORMANCE REPORT M2

The new format performance report was received and noted by the Committee.

The Director of Nursing provided an update on the key highlights and lowlights from May:

- There had been 2 cases of Clostridium Difficile (C Diff) and 1 case of E. coli infection in month
- There had been zero serious harms in month
- A decline in patient survey scores for involvement in discharge had been recorded – focused work would be undertaken and further feedback provided at the next Committee meeting

The Director of Operations and Performance provided an update with regard to operational performance:

- The Trust continued to perform well against national access targets
- Planned activity had been maintained despite the disruption of the recent cyber-attack. In total, there had been 7 patients cancelled as a result and these cancellations had not put patients at risk
- The Trust was pleased to report a very low DTOC (Delayed Transfer of Care) rate which was as a result of the excellent work of the integrated discharge team
- The Trust was a positive outlier for weekend discharges with the highest number in GM
- While A&E had failed the 95% A&E target, it had achieved the 90% revised trajectory
- There had been an increased level of admissions from young people with mental health problems and out of area patients – discussions were taking place with the relevant parties in relation to these patient cohorts
- WWL remained the 2nd best performing A&E in GM

The Committee were particularly concerned to note the increase in attendances by young people with mental health problems. These attendances put additional pressures on the hospital system and the acute setting was not felt to be an appropriate place of care. Consideration needed to be given as a health economy to the availability of tier 4 mental health care beds.

A&E

The A&E report was received and noted by the Committee.

NHSI submissions for breaches of agency capped rates

The agency cap breach report was received and noted by the Committee.

The Director of Workforce advised that the implementation of the IR35 regulations continued to impact the Trust and discussions to institute a regionally agreed locum and break glass rate were ongoing. Positively, the Trust continued to make in-roads on agency spend with a downward trajectory over recent months however break glass would continue where required for patient safety.

This report would be incorporated into the finance report for future meetings.

8. FINANCE, BIG 12 AND DIVISIONAL CIP REPORT FOR MONTH 2

The May finance report was received and noted by the Committee.

The Director of Finance reported the following key highlights and lowlights:

- The Trust was £800k away from plan in month and year to date
- Year to date, the Trust was reporting a £3.9m deficit
- CIP had underperformed with £900k achieved for the year so far which was £400k away from plan
- The cash position continued to be closely monitored
- A 'Use of Resources Rating' of 3 had been achieved in line with plan
- It was anticipated that Sustainability and Transformation (S&T) funding for the first quarter would be achieved

While each of the divisions had under-performed against plan, there had been particular concerns in relation to the performance of Specialist Services. Weekly monitoring meetings had been initiated and the appropriate support would be put in place to assist the division in returning to plan. Specific concerns had been raised in terms of the tariff for revision procedures which did not necessarily reflect the complexity of cases.

The Committee agreed that it would be appropriate for the Specialist Services division to attend the next meeting to provide a detailed analysis of the factors that had led to the deterioration in position and assurances around the actions that would be taken to return to plan.

ACTION: Director of Operations and Performance

The Director of Finance provided an update on the 'Big 12' schemes and CIP.

The Committee noted that there had been a reduction in the level of CIP required from the divisions and the recent NHS Improvement visit to review plans had been very positive. A prioritisation exercise for transformation bids to support the 'Big 12' was scheduled to take place later in the week. The Committee noted that delivery of CIP plans would be critical this financial year and assurances around achievement would be key.

9. BAF SCORING

a. To meet all national access targets

Failure to meet the A&E 4 hour target – the Committee noted that A&E was currently meeting the revised trajectory of 90% and there were no concerns around the delivery of quarter one. However it was noted that, while the A&E team had implemented a number of improvement initiatives, there were increased attendances to A&E by young mental health patients and out of area patients which provided additional pressure and could potentially put year end achievement of 95% at risk. The Committee noted and discussed the potential to lose S&T funding should the target not be achieved. It was agreed that the Committee needed to have visibility of GP out of hours, deflection projects and community bed plans to gain assurance around the external factors impacting on delivery. The Committee agreed to score as $4 \times 4 = 16$.

b. To achieve two year budget stability

Failure to deliver the 'Big 12' schemes - the Committee noted that there continued to be thorough investigation into and scrutiny of the Big 12 schemes. It was agreed to score the risk at $5 \times 3 = 15$.

Failure to deliver divisional CIP - the Committee had not yet seen the divisional CIP plans but assurance was given by the ED team that divisions continued to work on these. It was also noted that the divisional CIP requirement had reduced to £4m. It was agreed to score the risk at $5 \times 3 = 15$.

Budget overspend, cash flow reductions and liquidity - the Committee noted that, whilst the budget was overspent, there were robust plans in place to address this. The cash position continued to be good. It was agreed to score the risk at $5 \times 2 = 10$.

10. MINUTES RECEIVED FOR INFORMATION

The Committee received and noted the reporting minutes for information.

11. ANY OTHER BUSINESS

The Committee received and noted a paper regarding Trauma and Orthopaedic elective market share.

12. KEY SUCCESSES AND RISKS

Key successes were agreed to be:

- The achievement of zero serious harms in the month of May
- The management of the cyber-attack and the minimal disruption to patients
- The successes of the integrated discharge team
- The positive NHS Improvement visit with regard to CIP plans

Key risks were agreed to be:

- The financial position in the month of May
- Financial performance of the Specialist Services division
- CIP achievement, particularly recurrently

- Concerns around the appropriateness of the tariff for complex revision cases
- The increasing number of young mental health patients

13. COMMITTEE EFFECTIVENESS FEEDBACK

Committee effectiveness feedback was sought and it was noted that the meeting had been well conducted with good engagement of members and focus on the key issues.

14. DATE AND TIME OF THE NEXT MEETING

The next meeting of the Finance and Investment Committee will be held on 18th July 2017, 9.30am at Royal Albert Edward Infirmary.