

Workforce Committee

Key summary points from the meeting held on 16th October 2015

1. Staff Survey

The Committee received an update regarding this year's Staff Survey which has been distributed to every member of staff. The Committee was informed that a new approach is being taken in some areas. Facilities are providing protected time to support staff to complete the survey. This approach was well received and the Committee discussed running these sessions in some of the other areas and departments emphasizing the importance of releasing staff time to complete the surveys.

2. Workforce Profile

The Committee received an update from the Workforce Director regarding Workforce Profile. The profile provides an analysis of the current workforce and provides a forward view. This supports organizational strategy and workforce planning and design.

The Committee considered the profile against the national, regional and local context. The Committee agreed that whilst workforce transformation strategies existed there was a need to review these against the profile. In particular to answer the question 'how will we be delivering care in 20 years time?'

A Board development session will support this work further.

Victoria Maher
16th October 2015

Finance Committee

Key summary points from the meeting held on 23rd October 2015:

Finance Director Report Month 6

The Committee reviewed the Finance Report as also reported to, and summarised for, the Board.

Key points for the Board are:

- Income year to date is £534,000 above planned levels. Income levels for the remainder of the year are expected on average to be higher.
- Pay costs continue to rise - £18,826 million.
- Care Groups continue to have difficulty managing wards within the unavailability rate of 22%.
- A review of performance against the nursing agency ceiling highlighted that the level of agency nursing spend at month 6 was 11.74%, 3.74% and £215,000 per month away from the required 8% ceiling. Indicators established to monitor this performance showed that little progress has been made in the past six weeks to reduce agency nursing spend. Reducing nurse agency spending to the ceiling level of 8% would reduce expenditure by £1.3 million and enable the Trust to deliver an outturn position of £16.3 million.
- The Trust needs to continue to explore options to manage the medically fit to transfer patients, approximately 140.
- The Cost Improvement Programme continues to underachieve with savings delivered at the end of month 6 amounted to £4.719 million against a plan of £6.932 million.
- The Trust is presently forecasting a deficit of £17,805 million.

Progress Report on Savings Schemes

An update on progress against the savings schemes as discussed and agreed at the Trust Board meeting in September 2015 was received.

While progress has been made in taking forward the programme to achieve a savings target of £4.5 million, the committee was concerned about the savings at risk amounting to £2.237 million and furthermore the proportion of this (£1.88 million) which is attributable to nurse savings scheme

Name of Chair: Harmesh Darbhanga
Date report prepared: 26th October 2015

HOSPITAL EXECUTIVE COMMITTEE

Key summary points from the meeting held on Tuesday 27th October 2015:

- The Committee **NOTED** both financial and operational performance of Month 6 and Quarter 2, with particular discussion around concerns in relation to continued overspends in Pay, mainly ongoing excessive use of medical and nursing agency staff. The Committee also **NOTED** the forecast outturn modeling of the financial year ahead to help scope how we may function within the given control total of funds.
- The Committee **APPROVED** the Emergency Department Escalation Triggers and Actions document for implementation.
- The Committee **RECEIVED** a progress update on Future Fit and the timelines for various elements of the process.
- The Committee **APPROVED** the implementation of the Winter Resilience and Bank Holiday Pressures Plan, with the need to enact the plan sooner than originally anticipated due to early peaks in demand; but with flex around use of escalation space to mirror surges in demand.
- The Committee **RECEIVED** an overview of the challenges being encountered in managing and controlling C-Diff, the known causalities, and the subsequent improvement and recovery plan.

Debbie Kadum, Acting Chair
Tuesday 27th October 2015