

Performance Committee

Key points from the meeting of the Performance Committee held on 24th October 2018 are:

Operational Performance Report

RTT continues to perform well and above the 92% trajectory. Some areas continue to require more careful monitoring, including T&O who have a different sustainability issue. **The committee commended the team for receiving a national ranking of 21 out of 126 Trusts (upper-upper quartile) for RTT performance.**

It was noted that SaTH was one of the most successful NHS trusts at managing and releasing stranded patients: a terrific achievement.

The Trust continues to **achieve the Diagnostic Waiting Times target despite strong growth in levels** of activity.

Although the trusts performance is above average for NHS Trusts, Cancer performance failed the national target by a very narrow margin in Quarter 1. September's position will be important in terms of determining whether the Trust achieves Quarter 2 position. The future looks challenging with particular concern regarding the urology specialty.

Severe challenges continue regarding Emergency Department performance. Details of work culture at PRH and work with Emergency Care Intensive Support Team was shared. The requirement for strong leadership and nursing staff engagement in these very difficult times was noted.

Financial Performance Month 6 and Deficit Reduction

Half way through the financial year, the Trust is reporting a year to date pre-provider sustainability fund deficit of £11.357 million, £0.438 million worse than plan. However winter pressures and profiling of budgets means the underlying picture is much more challenging.

The Trust is currently presenting an under delivery in respect of the Waste Reduction Programme of £3.065 million which is a significant improvement on the September 2018 performance.

New spend issues amount to £7.111 million. Part of these costs reflect emergency actions needed to prevent a collapse of A&E services and NHSI support for those costs may be forthcoming.

It was noted all four care groups and central services have failed to deliver their planned Waste Reduction Programme. These five organisational groups have also incurred significant unbudgeted additional expenditure. Given that similar issues occurred last year **we have to accept our planning and budgeting processes are overwhelmed in all areas by events and are not effective.**

The care groups presented their plans to improve the end of year position and details of savings that could be made (amounting to circa £1.2 million). **The committee was pleased with the ownership and commitment shown by the care groups to reduce the variance from the control total**, however, it was not assured of the delivery of this, considering the risks associated with this, particularly in Unscheduled Care, and the unknown impact of winter.

As a result of the above, **the Trust's most likely forecast position is to overspend against the Trust's control total by £4.246 million.**

The Performance Committee reflected on a number of factors outside our control which were making efficient and effective care delivery hard. In addition, Carter Review work reveals SaTH has one of the most efficient (lowest) cost per unit of care delivered in the country. (Upper-upper quartile efficiency). However the committee also noted important areas (e.g: Criteria Led Discharge, Operating Theatre Usage, Consultant Work Scheduling, Private Practice Management & Marketing) where we are old fashioned, slow to change and performing very poorly compared to other trusts. In many of these areas we have, for many years, been failing to deliver plans and improvement work. **We therefore need to very urgently find a way of empowering our clinicians, nurses and other leaders to make these changes where they are wholly under our control.**

Additional 30 bedded ward

NHS Improvement has made £3 million available to the Trust to create a new ward at RSH to help ease winter pressures. The money will be used to refurbish part of the Copthorne Building to provide 30 extra beds. Work is underway and it is expected that the ward will be in use by January 2019 to help meet winter demands.

Board Assurance Framework

The committee reviewed the following risks at the end of the meeting:

If we do not achieve safe and efficient patient flow and improve our processes and capacity and demand planning then we will fail the national quality and performance standards (CRR 561).	Red – No change
If we are unable to resolve the structural imbalance in the Trust's Income & Expenditure position then we will not be able to fulfil our financial duties and address the modernisation of our ageing estate and equipment (670).	Red - No change
If we do not deliver our waste reduction schemes and budgetary control totals then we will be unable to invest in services to meet the needs of our patients (1187).	Red – No change

It was suggested that a review of the 'subsidiary' Risk Register takes place as some of the risks may need to be assigned to the Sustainability Committee.

Other items discussed included:

- **Costs associated with the proposed reconfiguration of A&E.**
- **Services under the Spotlight.** The proposal to provide additional capacity for Neurology Services in Shropshire was not approved by the Performance Committee. A presentation on the issues affecting the Urology Service and next steps was delivered.
- **Carter Review Update** – latest position received.
- **Operational Plan** – latest update received.

Completed by: Clive Deadman, Chair of Performance Committee
Date: 24th October 2018