

Update to Trust Board May 2019

Sustainability Committee 23rd May 2019

The meeting was held on 23 April 2019 and was chaired by Ben Reid. The meeting was quorate with good attendance.

Digital Strategy

- A&E Options Appraisal – The Committee endorsed the progress for the A&E Options appraisal and requested that this was undertaken at pace.
- Meeting with Fiona Sanders NHSE on 5th June to discuss possible funding options for Digital agenda. An update from this meeting will be given to Sustainability Committee and Trust Board.
- Data Warehouse – Servers had been delivered. Invitations to submit tender responses and shortlisting had taken place. It was agreed that KMACH Limited would be approved as the chosen supplier.
- Semahelix – system needs to be upgraded but is aligned to other sub –upgrades. Options to address this were being worked through.
- Statistical Process Control (SPC) charts - SaTH needs to make progress to implement SPC charts into the reporting information to the Trust Board in the first instance, a training programme is being organised across the Trust for all staff who are responsible for providing reports. This will provide education on the use of SPC charts and train the relevant staff on how to produce them. There is software available via NHSi which simplifies the process for staff to produce SPC charts and training on this will also be provided.
- Document Management - The Trust would need to have a data cleanse ahead of implementation of EPR which would need to include a cleanse of the RTT data and outpatients. A point in time would need to be agreed when written notes would become digitalised only.

Sustainable Services Programme

- SSP Structure to deliver the Outline Business Case (OBC) – recruitment process had started. The lack of senior positions being filled is impacting upon decision making and overall project strategy. Current team capacity constraints have resulted in key Task and Finish Groups prioritising clinical design and key adjacencies over detailed patient pathways and workforce detail.
- Master Programme was discussed and delivery dates to enable the OBC to be approved at Trust Board on 3rd October. There was an agreement that this is heavily dependent on team capacity being expanded and in particular the senior/leadership roles.
- NHSi – call scheduled for 24 May 2019 to better understand the approval process and the requirement for a gateway review. NHSi are expecting a draft OBC on 1 August 2019.
- Affordability due to inflation costs – this remains an issue. The Technical Team are working up options to evaluate how the scheme could be delivered to get the best value for money.
- Energy centre and Multi-storey car park – plans are being progressed, it is acknowledged that these are additional to the £312m scheme but remain enablers for SSP.

Transforming Care Production System Update (TCPS)

- The KPO Team continue to support the Trust Quality Improvement Plans (QIP), and as the organisation continues to improve, there is a 'pull' for the KPO Team to provide bespoke training on topics within the TCPS methodology to support the actions within the QIP
- Recently Chris Hopson, Chief Executive of NHS Providers visited wards and departments including Maternity, Postnatal, Estates, Cardiology and Respiratory Departments at PRH. Mr Hopson was able to see the wealth of improvement across the Trust.
- Excellent work undertaken by Procurement. The Team celebrated their good work by being nominated as one of the finalists for the HSJ Awards for Value and healthcare and have saved £1.8m in procurement last year.

Capital Programme

- Financial Review as at Month 01 2019/20 (April 2019) - Within the Financial Strategy agreed by Trust Board the internally generated Capital Resource Limit (CRL) for 2019/20 was agreed at £10.450m Capital Resource Committee (CRL) for 2018/2019 increased to £14.143m. £4.5m committed is held in contingencies by departmental managers.

- Mattress contract expires in October 2019. Bed frame stock c10 years old and will need to be replaced shortly. CPG agreed that it was imperative that this project, together with Ultrasound Scanner Replacement, needs to be prioritised and resourced correctly. Operating lease options were being explored.