

Finance and Performance Assurance Committee Key Issues Report

Report Date: 1 st December 2020		Report of: Finance and Performance Assurance Committee
Date of last meeting: 1 st December 2020		Membership Numbers: The meeting was quorate.
1	Agenda	<p>The Committee considered an agenda which included the following:</p> <ul style="list-style-type: none"> • Operational Performance Month 7 • COVID-19 Update • Finance Report Month 7 • EU Exit Update • Progress on delivery of key objectives for 2020/21 • Business Case: 56 bed Modular Ward • Variation Letter: Adapt and Adopt Funding • Extension of Mobile MRI Capacity • National Cost Collection 2019/20 • Contracts Award Summary Report • BAF – key strategic risks • Draft Minutes of Sustainability Assurance Committee 29.10.20 • Update report from Capital Planning Group meeting 12.11.20 • Winter Volunteering Programme: Memorandum of Understanding
2a	Alert	<p>The Committee wish to alert members of the Board that:</p> <ul style="list-style-type: none"> • The number of 52 week breaches is increasing and in response to this the Committee sought assurance of the process in place to capture information on issues and manage them to avoid and minimise any potential harm to patients. This is complex and difficult to do and the capacity issues in our diagnostic services mean there is a need for more progress. • The Trust continues to fail to achieve the diagnostic 6 week target. Mobile equipment is in place on both sites with a view to improving performance. • The Committee was advised that one of the issues hindering plans to improve endoscopy performance is delays by patient choice (declining to self-isolate post swabbing). This is in addition to workforce issues. The impact of IPC constraints in endoscopy was also noted. • Breast 2ww performance is underachieving due to physical capacity in clinics. This will be added through additional capital funds. Only 25% of patients are being seen within 2 weeks. 50% of cancer patients in some specialties are seeing an extended delay to treatment due to diagnostic delays, with 30% of patients experiencing delays through exercise of patient choice. The Board/STP/county might consider some form of major PR/communication campaign. • The second wave of COVID-19 is proving more difficult to manage than the first wave due to lack of spare capacity.

		<ul style="list-style-type: none"> • NHSE/I have yet to approve the STP and Trust's forecast outturn position of a deficit of £7.724 million for 2020/21. • A new risk of circa £1.3 million on the outturn position associated with potential underperformance on the NHS Wales contract was discussed in addition to the existing risk of the Elective Incentive Scheme. • The Trust has not updated its forecast outturn since its submission in October. Following the Month 7 the Trust is reviewing expenditure in month, expenditure plans and potential risks to the end of year financial outturn to inform reporting at month 8 and subsequent months.
2b	Assurance	<p>The Committee wish to assure members of the Board that:</p> <ul style="list-style-type: none"> • Restoration and recovery of services is progressing at a rate better than predicted across most areas, but this is still not progressing at a level acceptable to the Trust or the regional team. • There was a slight improvement in RTT compliance, but there was a risk this could deteriorate with increased demand for ITU and potential escalation into theatres. Compared with other Trusts we are a slightly below average performer. • Cancer performance remains a top priority for the Trust. For Cancer treatment we are performing better than most other Trusts. • There are various arrangements and support mechanisms in place to support the wellbeing of staff during the pandemic. • The National Cost Collection was submitted on 29th October 2020 and a detailed action plan outlining work underway/completed was received by the Committee. • Information on the number of contracts awarded in respect of capital and revenue schemes was shared with the Committee.
2c	Advise	<p>The Committee wish to advise members of the Board that:</p> <ul style="list-style-type: none"> • The Trust was not successful in its bid for funding for e-prescribing. This was a huge disappointment given that high risk medicine errors can be reduced by up to 50% by having this in place. From a quality perspective it presented a real opportunity to improve the clinical profile for our patients. • As set out in the Board of Directors paper for public meeting held on 5th November, the Trust has signed a variation letter in respect of the Memorandum of Understanding for Adapt and Adopt Funding to increase the PDC from £2811k to £3256k. • The Committee welcomed receipt of a report outlining progress on delivery of the key objectives for 2020/21. • Support was given to the Business Case for 56 bed modular ward to provide additional capacity and recommended approval of this by the Board of Directors should funding become available. • The Committee confirmed their support of the extension of two MRI scanners for a further six months to assist the Trust get its diagnostic performance back on track and recommended approval of this by the Board of Directors.
2d	Review of Risks	As the BAF was still being developed, it was not considered on this occasion.

3	Actions to be considered by the Board	<ul style="list-style-type: none"> • Committee Summary to be noted. • Consideration and approval of: <ul style="list-style-type: none"> ○ Business Case: 56 bed modular ward subject to funding confirmation ○ Extension of mobile MRI capacity 		
4	Report compiled by	<i>Clive Deadman Chair of Committee</i>	Minutes available from	<i>Amanda Young Committee Support</i>