

Performance Assurance Committee, Key Issues Report		
<b>Report Date:</b> 19 November 2024		<b>Report of:</b> Performance Assurance Committee
<b>Date of meeting:</b> 19 November 2024		Rosi Edwards(Chair), Ned Hobbs, Sarah Dunnett, Rajinder Dhaliwal, Inese Robotham, Lisa Mitchell, Hugh Adams(part), Rebecca Gallimore(part)
1	<b>Agenda</b>	<p>The Committee considered the following:</p> <ul style="list-style-type: none"> <li>• Performance Highlights</li> <li>• Integrated Performance Report</li> <li>• Workforce Plan and Performance Impact</li> <li>• Data Warehouse update</li> <li>• Estates – GT Capital Performance Review</li> </ul>
2a	<b>Alert</b> <i>Matters of concerns, gaps in assurance or key risks to escalate to the Board</i>	<ul style="list-style-type: none"> <li>• <u>Electives and Cancer</u>: there were 329 breaches of the 65 week waits at the end of October (target 319) with November's figure predicted to be 286. It is unlikely that SaTH will achieve zero by the revised national deadline of the end of December 2024. Cancer: there has been progress with the over 62-day backlog, from over 400 to around 370 though SaTH remains one of the poorest performers in the region regarding the percentage of patients receiving care within the target. The focus has been on getting treatment for the long waiters, but SaTH needs to prevent such high numbers getting to this stage and will focus on improving outpatient and theatre bookings (currently around 85% and 91%), seeking to bring these up to the percentages achieved elsewhere (around 95% and 97% respectively).</li> <li>• <u>Diagnostics</u> remains challenged, with total turnaround times (TAT - appointment + reporting) higher than the target in MRI, CT, Ultrasound and plain film. Actions are in hand (CT, radiology processes) or planned (MRI, December) to reduce TAT. Progress in diagnostics is crucial to the electives and cancer targets being met.</li> <li>• <u>Urgent and Emergency Care (UEC)</u>: SaTH and the system are carrying a huge risk, particularly with the over 12 hour waits in ED, where 20% of ED attenders wait longer than 12 hours for admission, and where waits can be over 24 hours. Shropshire Telford and Wrekin (STW) are planning to manage Winter pressures system-wide - see below. A key action to bring the over 12 hour waits down concerns frailty: managing patient care in their own homes with rapidly deployed care and nursing staff and initiating longer term statutory care while the patient is still in their own home. PAC will be receiving reports on how this and other incremental changes are working.</li> <li>• <u>Workforce Report</u>: PAC noted that there are forecast risks to delivery of the 7% reduction in workforce by the end of 2024-2025 particularly with the use of our bank workforce and our substantive workforce reductions. The Financial Recovery Group has identified 24</li> </ul>

		<p>mitigations/options, which are being considered throughout November. Once agreed they will be monitored and reported through to the remainder of the year. PAC wanted to be assured that SaTH has the right staff in the right place to be able to achieve the performance it requires for the benefit of our patients and will be looking at how insourcing and outsourcing are currently used to augment service provision.</p>
2b	<p><b>Assurance</b> <i>Positive assurances and highlights of note for the Board</i></p>	<ul style="list-style-type: none"> <li>• <u>UEC</u>: in response to a query at the October meeting, PAC received a paper on the transparency of information within the system and the extent to which it is in real time, and how decisions are made within SaTH and the system to manage the UEC pathway. PAC heard that STW are using a tool to manage risk across the whole system to support making conscious decisions about balancing risk. While it doesn't have access to real time data for out-of-hospital care, it receives updates 3 times a day. PAC will want to receive evidence about this tool being used and having an impact on patient care in UEC.</li> <li>• <u>Management of Capital Projects</u>: PAC took assurance from a report on changes that had been made to the management of capital projects, in particular drawing on the recommendations in a report commissioned from Gardiner and Theobald which looked at three capital projects and at the way fire risks were managed in each. PAC were pleased to note the progress made and asked for an update on and further information regarding the action plan and suggested that the effectiveness of the changes made might be suitable for a future internal audit. PAC will be seeking a further report on the fire strategy and fire risks at SaTH.</li> </ul>
2c	<p><b>Advise</b> <i>Areas that continue to be reported on and/or where some assurance has been noted/further assurance sought.</i></p>	<ul style="list-style-type: none"> <li>• <u>Data Warehouse (DWH)</u>: PAC heard that NHSE's experts have endorsed SaTH's approach to getting the DWH working again and to finding a medium and longer term solution. They confirmed they were happy with the way the Patient Administration System (PAS) had been rolled out. Not having a fully functioning DWH causes serious difficulties for SaTH in terms of knowing what has been achieved (no coded data) and what further activity SaTH could commission. PAC were assured that the DWH should be functioning fully and have been subject to tests to demonstrate this by the start of 2025-2026.</li> <li>• <u>PAC reviewed its performance</u> after 3 meetings: is it adding value, is it able to assist the board to gain assurance of the right things, what should it be looking at in more depth in order to gain assurance? PAC agreed it was important to find the right metrics for SaTH and the system so that we can see if actions taken are having an impact (see above, UEC and transparency as an example).</li> </ul>
2d	<p><b>Actions</b> <i>Significant follow up actions</i></p>	<ul style="list-style-type: none"> <li>• Chair has written to Chairs of Audit and Risk Assurance Committee, copied to Chair of Quality and Safety Assurance Committee, regarding possible topics for internal audit (management of capital projects; patients due for surveillance diagnostics and process for moving to active waiting list if delayed) and to Chair of People and Organisational Development Assurance Committee regarding the way SaTH ensures it has the right people in the right place particularly in scarce disciplines.</li> </ul>

		<ul style="list-style-type: none"> <li>• PAC to receive a report in January 2025 on actions to reduce the number and length of over 12 hour waits in ED.</li> <li>• PAC to seek a report on SaTH's fire strategy and management of fire risks in February/March 2025.</li> </ul>		
3	<b>Report compiled by</b>	<i>Rosi Edwards, Chair, Non-Executive Director</i>	<b>Minutes available from</b>	<i>Lisa Mitchell</i>