

FINANCE AND PERFORMANCE COMMITTEE MINUTES, ACTIONS & DECISIONS

Date:	Wednesday 12 th December 2018	Time:	08:30 – 09:30
Venue:	Conference Room, Field House, BRI	Chair:	Professor Laura Stroud, Non-Executive Director (LS)
Present:	<p>Non-Executive Directors:</p> <ul style="list-style-type: none"> - Mrs Pauline Vickers, Non-Executive Director (PV) - Mr Trevor Higgins, Non-Executive Director (TH) (tele-conference) - Mr Andrew McConnell, Non-Executive Director (AM) - Ms Trudy Feaster-Gee, Non-Executive Director (TFG) <p>Executive Directors:</p> <ul style="list-style-type: none"> - Mr Matthew Horner, Director of Finance (MH) - Mrs Sandra Shannon, Chief Operating Officer (SES) - Mr John Holden, Director of Strategy & Integration (JH) - Ms Tanya Claridge, Director of Governance & Corporate Affairs (TC) 		
In Attendance:	<ul style="list-style-type: none"> - Professor Clive Kay, Chief Executive (CK) - Mr Robert Jones, (RJ) – Minute taker - Mr Carl Stephenson, Acting Head of Performance (CSt) 		
Observing			

No.	Agenda Item	Action
F.12.18.1	Apologies for absence	
	- Ms Cindy Fedell, Director of Informatics (CF)	
F.12.18.2	Declaration of Interests	
	None.	
F.12.18.3	Minutes of the meeting held on 28th November 2018	
	The minutes were agreed and accepted as an accurate record.	
F.12.18.4	Matters Arising	
	<p>The Committee noted that the following actions were closed.</p> <ol style="list-style-type: none"> 1. F.11.18.10 2018/19 Financial Recovery Plan 2. F.11.18.7 Terms of Reference Review 3. F.10.18.4 Readmission Data to Quality Committee 	
F.12.18.4.1	Matters arising from Board of Directors	
	There were no items escalated.	
F.11.18.4.2	Matters escalated from sub committees	
	There were no items escalated.	

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F.11.18.5	Corporate Risks relevant to the Committee	
	The corporate risks relevant to the Committee were noted.	
F.11.18.6	Board Assurance Framework	
	The framework was reviewed and discussed.	
F.11.18.7	Committee Annual Work Programme	
	The Committee Work Programme was presented by the Chairperson and recognised by the Committee.	
F.12.18.8	Report from Finance & Performance Oversight Committee	
	<p>CK presented the Report from F&P Oversight Committee</p> <p>On performance – the Trust had seen positive improvements in delivery of the elective referral to treatment target however there were still one or two areas for significant concern.</p> <p>The main area of concern for cancer delivery is Urology where due to sudden increases in referrals, capacity has not been able to meet the demand.</p> <p>The delivery of the emergency care standard remains extremely challenging. The Trust, last week, received 3 days support from the Emergency Care Intensive Support Team (ECIST). SES to update subsequently.</p> <p>The diagnostic standard had deteriorated which was mainly due to the recording of endoscopy however diagnostics expect to be back on track by the end of the financial year.</p> <p>There was a meeting with NHSI on Tuesday 11th December where the Trust was urged to ensure that no patients wait over 52 weeks.</p> <p>SES updated on the efforts to improve against the ECS target. The ECIST recognised that the Emergency Department see 400-450 attendances per day and that November this year had seen a 9% increase in attendances versus the same period last year.</p> <p>ECIST advised that there are 3 key priorities:</p> <ol style="list-style-type: none"> 1) Physical Capacity – the current capacity is 280-300. The department is 10 cubicles short for the number of patients it sees. 2) Whole system streaming – both internal and external is required to ensure that patients are seen by the most appropriate clinician as quickly as possible. 3) A quality improvement strategy - including coaching, is required as staff are feeling overwhelmed. <p>The Trust's discharge processes are good and must be maintained however there is still more opportunity to improve them.</p>	SES

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	<p>Initial steps have been taken to improve, including plans to increase the number of ambulatory care pathways (both medical and surgical), a new leadership team in ED, and joining the SAFER collaborative.</p> <p>The Trust is still aiming to deliver the 95% target.</p> <p>CK updated with regards to how the Trust performance compares to its peers. He acknowledged that the Trust's A&E sees over 100 more attendances through its main A&E department than comparable Trusts.</p> <p>He explained the difference between the 3 Types of attendance which are counted as part of the ECS and recognised that the Trust's performance for Type 1 (A&E/Ambulance attendances) was in line with comparable Trusts.</p> <p>The conclusion is that the Trusts single access point (ie one front door) compared to other Trusts with multiple access points is having a material impact on performance.</p> <p>ECIST also recommended that the ambulatory care pathways need to be developed.</p>	
	Board Dashboard	
F.12.18.9	Finance & Performance Committee Dashboard	
	<p>The key points of the Finance and Performance Committee dashboard were discussed and noted elsewhere on the agenda.</p>	
	Finance	
F.12.18.10	Finance Report	
	<p>Due to the short deadline for the Month 8 Committee, a summarised financial position was presented to the Finance committee.</p> <p>The Trust has successfully achieved its pre-PSF control total deficit target of £6.7m at the end of November 2018.</p> <p>The position is broadly in line with the Recovery Plan forecast.</p> <p>Cash is £13.8m which is £16.2m below plan but in line with the Recovery Plan forecast.</p>	
F.12.18.11	NHSI Operational plan 2019/20 submission	
	<p>The first submission of the 2019/20 plan will be brought to the committee in January.</p> <p>Due to the reduced length of the December meeting the conversation focused mainly on the meeting with NHSI on the previous day and the recovery plan.</p>	
F.12.18.12	2018/19 Financial Recovery Plan	

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	<p>MH described the NHSI finance discussion.</p> <p>He explained that the conversations had been challenging but that improvement in productivity had been seen during October and November which took the over trade from £9m to £10m.</p> <p>In order for the ADM to be approved NHSI will require a compliant Business Case which will be submitted to the Board of Directors in January.</p> <p>The development of the business case will be supported by financial and legal professional advisors.</p> <p>The aim is to get the business case approved prior to year end in order that the benefits can be released in year or alternatively for NHSI to adjust the Trust's control total accordingly. It is expected that the business case will take 3 to 6 weeks to be approved by NHSI, which is dependent on whether it is judged to be a material or a significant transaction.</p> <p>The financial advisors have indicated that the Trust will be able to account for the £7m of benefits in this financial year however the risk is whether NHSI will approve the business case.</p> <p>Discussions are taking place with the Trusts Auditors with regards the accounting treatment of the transaction in relation to the final accounts process.</p> <p>MH described how NHSI reviewed the recovery plan and challenged the amber schemes.</p> <p>NHSI focused on how the Trust would limit its winter agency spend. MH explained that the nursing roster grip and control meetings would support the management of winter spend.</p> <p>MH emphasised the importance of delivering the £5.8m cost out initiatives.</p> <p>CK summarised that if the Trust:</p> <ul style="list-style-type: none"> • Gets paid for what it does • Can do the ADM • Continues to focus on the recurrent/sustainable BIP schemes • Delivers the £5.8m cost reduction <p>Then it will get paid the associated PSF payment and would be in a strong position going into next year.</p> <p>CK confirmed that the Recovery Plan and key milestones would form part of the financial assurance report for the Board.</p> <p>CK explained that the ADM Full Business Case will be presented at the closed Board meeting on 10th January.</p> <p>LS added that the committee supported the strategy to deliver the ADM.</p>	<p>MH</p> <p>MH</p> <p>MH</p>

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	CK summarised that the Trust should maintain the trajectory for elective care and continue to make efforts to deliver the Emergency Care Standard.	
	Performance	
F.12.18.13	Performance Report	
	The key points were addressed by the Report from Finance and Oversight Committee.	
F.12.18.14	Bradford Improvement Programme Board Report	
	The key points were addressed by the 18/19 Financial Recovery Plan	
F.12.18.15	Any Other Business	
	LS recognised the good work and efforts that members are taking to improve.	
F.12.18.16	Matters to share with other committees	
	There were no matters to share.	
F.12.18.17	Matters to escalate to the Board of Directors	
	It was agreed that the Finance Recovery Plan will be shared with the Board of Directors.	MH
F.12.18.18	Matters to escalate to the Corporate Risk Register	
	There were no matters to escalate.	
F.12.18.19	Items for Corporate Communication	
	There were no matters to raise.	
F.12.18.20	Date and time of next meeting	
	Wednesday 30th January 2019. 08:30 am - 10:30 am Conference Room, Field House, BRI	

BRADFORD TEACHING HOSPITALS NHS FOUNDATION TRUST
ACTIONS FROM FINANCE AND PERFORMANCE COMMITTEE – 28 November 2018

Date of Meeting	Agenda Item	Required Action	Lead	Timescale	Comments/Progress
26/09/2018	F.9.18.4.1	Matters arising from the Board A Theatres deep-dive is to be completed.	Chief Operating Officer	30/01/19	A theatres deep dive will be presented to Committee in January 2019
31/10/2018	F.10.18.4	Matters arising The Quality Committee was not assured by the data presented regarding readmissions and they have requested that the Finance Committee review the data. SES stated that the data quality of readmissions needs validating/auditing to support understanding of the trends. This would be undertaken as part of the planned 'deep dives' at which point the position would be reported back to the Quality Committee.	Chief Operating Officer and Chief Nurse	30/01/19	
31/10/2018	F.10.18.5.1	Corporate Risks relevant to the Committee Corporate Risks to be reviewed considering the Model Hospital discussion.	Director of Finance	30/01/19	This will form part of the next review of the Corporate Risk Register.
31/10/2018	F.10.18.4.1	Model Hospital – Next Steps To be discussed at the next Board Development Session how the Model Hospital should be used as part of the new CBU structure.	Director of Finance	28/02/2018	Board development session
28/11/2018	F.11.18.21	Matters to escalate to the Board of Directors The Finance Recovery Plan will be shared with the Board of Directors.	Director of Finance	30/01/19	
12/12/2018	F.12.18.12	18/19 Financial Recovery Plan ADM Full Business Case to closed Board	Director of Finance	10/01/19	