

FINANCE AND PERFORMANCE ACADEMY BRIEFING MEETING MINUTES, ACTIONS & DECISIONS

Date:	Wednesday 26 th January 2022	Time:	09:00-10:00
Venue:	Microsoft Teams	Chair:	Julie Lawreniuk, Non-Executive Director
Present:	<ul style="list-style-type: none"> - Mr Sajid Azeb, Chief Operating Officer (SA) - Mr Matthew Horner, Director of Finance (MH) - Mr Chris Smith, Deputy Director of Finance (CS) - Mr Michael Quinlan, Deputy Director of Finance (MQ) - Professor Janet Hirst, Non-Executive Director (JHi) - Mr Mohammed Hussain, Non-Executive Director (MHu) - Ms Karen Walker, Non-Executive Director (KW) 		

No.		Action
FA.1.22.1	Apologies for Absence	
	No apologies were received.	
FA.1.22.2	Declaration of Interests	
	No declarations of interest were noted.	
	Performance	
FA.1.22.3	Covid-19 Update	
	<p>SA shared the Vis-wall data set and informed that there are currently 94 Covid-19 positive patients in the hospital.</p> <p>There are 5 wards dedicated to Covid-19 at present, which is having a detrimental impact on elective recovery plans. During previous COVID waves there were a significant number of patients requiring ICU admission and NIV (Non-Invasive Ventilation), but there has been little demand for these in terms of the Omicron strain. Patients are still requiring segregation and the virus is still having an impact on performance, even though the vaccination programme is lessening ICU demand.</p> <p>Elective Ordinary Spells – good progress had been made prior to the Omicron increase and activity levels recovered up to approximately 100 inpatient elective overnight stay procedures per week. The volume of activity dipped over Christmas, which was planned for, but the level of drop seen wasn't anticipated. This was due to Omicron numbers, staff absences and less patients being seen either due to the fact that they were COVID positive or did not want to attend for their procedure.</p> <p>Currently Elective Inpatient Overnight Stays are being managed through Ward 14, a 13 bedded ward and one of the smallest wards we have. This is resulting in challenges associated with volumes of</p>	

	<p>patients that we can operate on due to the lack of bed capacity for ultra green elective care.</p> <p>The 5 ENT daycase theatres (Bronte) are now in use, but bed constraints are impacting on activity. This won't improve until Wards 2, 5, 20 and 21 become available again. Daycase numbers have been maintained much more successfully than inpatient numbers and are broadly in line with the plan.</p> <p>Outpatients – around 80-90% of baseline has been maintained. January has seen a dip related to staffing and patient availability.</p> <p>RTT 104 Week Waiters – The Trust began to out-perform against the planned position. In early January our position was 150 patients waiting over 104 weeks for treatment against a forecast of 250. We will not be able to maintain ahead of plan as a result of the limited operating.</p> <p>Over 52 Week Waiters – In mid-December the numbers flat-lined, but have since increased due to Omicron. The Foundation Trust remains ahead of plan, with a total waiting list of 35,500. Challenges remain due to the latest Covid-19 wave.</p> <p>Cancer Waits Over 62 Days – The target is to return to the February 2020 position. There are currently around 40 patients on the list, but this has been as low as 15.</p> <p>Ambulance Handovers – performance has recently become more variable, reflecting bed availability. Segregating patients due to Covid-19 is adding time to the flow of patients through ED into the bed base. Approximately 50% of handovers are completed within 15 minutes. The target for next year is 65% within 15 minutes, 95% within 30 minutes and 100% within 60 minutes.</p> <p>ECS – the Foundation Trust has maintained top quartile performance when compared to peer organisations. The Vis-wall has changed to reflect the new standards that will be coming into force next year. Once such standard is the percentage of patients who spend more than 12 hours in department. Our performance was less than 3% up to July 2021, but has since deteriorated to around 7-8% more recently due to the bed pressures being experienced. .</p> <p>The average amount of time non-admitted patients spend in A&E is currently 3 hours, 51 mins and work is ongoing to reduce this.</p> <p>Average Time for Decision To Admit (DTA) – this was previously estimated at 3 hours, but in reality is more likely around 5 hours.</p> <p>Decision To Admit time and trolley waits are good compared to peer organisations. Total Length of Stay for Admitted Patients is 10 hours on average from registration to being moved to a bed. 8% of patients are waiting more than 12 hours. There has been a</p>	
--	---	--

	<p>significant increase in A&E attendances and discharges before 1pm from ward areas have remained static at around 22-23%.</p> <p>Elective/Non-Elective Length of Stay – remains static</p> <p>2 Week Wait Cancer – the 93% standard has continued to be delivered, with dips in November and January.</p> <p>Cancer 28 Day Faster Diagnosis – there have been some challenges, but the Foundation Trust is performing well against the 75% standard.</p> <p>62 Day First Treatment – performance has been improving, with occasional dips.</p> <p>RTT Incomplete Performance – performance is currently 64% against a 92% standard. This is in-line with peer organisations.</p> <p>40 Week Waits – there are currently 2000 patients waiting more than 40 weeks.</p> <p>Endoscopy Diagnostics – this is currently at 83% and work is ongoing to improve.</p> <p>KW queried the 104 week projection into March and asked if service deterioration increased the amount of complaints.</p> <p>SA responded that the position at the end of March depends on how quickly the bed base becomes operational. This is linked to Wards 2 and 5 being up and running and Wards 20 and 21 being utilised for ultra green patients. SA stated that he did not have complaint data to hand but suspected they do increase in-line with service deterioration.</p> <p>JL asked if there was any intelligence on the Omicron wave peak. SA confirmed that the Foundation Trust was lagging behind other West Yorkshire trusts, but as it didn't reach the same peak, the rate of reduction is slower.</p> <p>JL queried if the Vis-wall was an internal document. SA stated that the Senior Operations team receives this regularly and reports for this Academy are pulled from that raw data.</p> <p>JL thanked SA for the update.</p>	
FA.1.22.4	Impact of COVID-19 On Performance	
	This was discussed under agenda item FA.1.22.3	
FA.1.22.5	High Level Risks Relevant to the Academy	
	It was agreed that this agenda item was covered by the other discussions.	

	Finance	
FA.1.21.6	Monthly Finance Report	
	<p>CS presented an update on the end of Month 9 position.</p> <p>A break-even position was reported with a significant degree of flexibility. The forecast is a £4 million surplus at year end, however there are a number of variables which could affect this figure. There is no anticipation of a worse than break-even position. Variables relate to income streams from NHSE/I and HEE, as well as accruals and potential system support before the end of the year.</p> <p>MH shared that the plan is to protect the Foundation Trust going into 2022/23. Discussions are ongoing regarding a redistribution of funding to assist Calderdale this financial year.</p> <p>JL commented that it would be beneficial to understand the flexibilities in more detail in an appropriate forum. MH to facilitate.</p> <p>JHi queried if there would be a detriment further downstream regarding the surplus and asked if it would be possible to retain some money to invest in struggling areas. MH replied that historically, any surplus would be included in the capital investment plans for the future, however the regime has changed and trusts are now told what they can spend on capital, which limits the value of surplus reinvestment. MH also commented that in year surpluses could potentially be used as an incentive for over-performing CBUs to be reinvested in year. A view would need to be taken against the overall Trust position and if the re-investment was recurrent or non-recurrent.</p> <p>JL cited the need to understand what is unique to this year (non-recurrent) and the real run rate. MH stated that this is not easy to do given the constant change in hospital configuration, but he will have the latest information when the plan is next discussed at the Academy.</p> <p>JL thanked MH and CS for the update.</p>	<p>Director of Finance (FA21030)</p>

FA.1.22.7	Budget Setting Process and Timetable	
	<p>CS updated the Academy on the current position. Omicron has affected the timetable shared in November due to operational pressures. All meetings not related to the pandemic response were stood down and the deadline for internal budget setting slipped by at least a month. There is no completion date forecast yet, but it is hoped that conversations will resume in February, with a completion date at the end of April.</p> <p>The external planning timetable doesn't factor in these pressures and remains in place. The deadline for submission of ICS draft plan (activity, workforce and finance) is the 17th of March. The provider plan deadline is on same date, but this can't differ from the ICS one. This means that the Foundation Trust will have to send its draft plans to the ICS around a week before the deadline.</p> <p>The latest guidance reports that the contract with the commissioners needs to be signed by 31 March 2022, but this may be delayed until July. The teams are working towards the activity and financial plans being signed off with the commissioners by the end of March.</p> <p>The final submission deadline is the 28th April. Given the operational pressures the Foundation Trust's draft plan will need to be developed from the top down using run rate intelligence and adding known investments, such as nursing and independent sector input.</p> <p>There is no clarity as yet on what the Trusts income quantum will be. The latest intelligence suggests around a £20 million funding reduction, meaning the efficiency target levied on the Foundation Trust will be at the higher end of what was envisaged.</p> <p>It was agreed to extend the next meeting to 2.5 hours.</p>	<p>Trust Secretary/ Associate Director of Corporate Governance (FA21031)</p>
FA.1.22.8	Bradford Place and ICS System Financial Update	
	<p>MH shared that an £8 million surplus is forecast for the end of the year. The ICS position is likely to be a £25 million surplus, with a best case surplus scenario of £40-£45 million. Papers to be circulated outside the meeting.</p>	<p>Director of Finance (FA21032)</p>
FA.1.22.9	Capital Update	
	<p>MQ provided an update. At Month 9, the forecast is to broadly spend the total CDEL allocation. There could be slippages/underspends, particularly in relation to Digital, of between 1.6 million, to £3.7 million. Further work is required with the Informatics team to understand the forecast outturn.</p> <p>The outcome of the commercial closure meeting in relation to</p>	

	<p>Tilbury Douglas also needs to be understood. There could be movements in the forecast for Month10 and liaison is needed with the Estates and Informatics teams to understand this, particularly in relation to the Maternity Theatre development.</p> <p>MQ indicated that the 2022/23 capital programme will continue to be tight. The ICS originally had asked the Foundation Trust to submit a programme based on need. The resulted in a system wide ask of £416 million compared to the ICS allocation of £158m, creating a gap of £258 million. The Foundation Trust had a capital programme based on need of £59m, with the draft allocation methodology indicating the Trust will receive around £24 million. The programme therefore needs to be reduced by around £35 million. It is unclear if the allocation of £24 million includes the £5 million loan and discussion is needed with the ICS to understand this.</p> <p>JL stated that it is important to understand what the slippages on schemes and lack of funding in 2022/23 will mean for the organisation.</p> <p>MH cited the need to understand the risk stratified capital list from the CBUs. This will be concluded by February and MH and MQ will try to secure as near as possible the £24 million that the indicative allocation process has already suggested the Foundation Trust will receive without losing any of the £5 million.</p>	
FA.1.22.10	WYAAT/ICS Programme Updates	
	This item was not discussed.	
FA.1.22.11	Independent Sector Contracts Update	
	MH highlighted a request from the Chairman to detail the independent sector position compared with the original planning assumptions. To be circulated outside meeting.	Director of Finance (FA21033)
FA.1.22.12	Any Other Business	
	No other business was discussed.	
FA.1.22.13	Matters to Share with Other Academies	
	There were no matters to share with other Academies.	
FA.1.22.14	Matters to Escalate to Board	
	There were no matters to escalate to Board.	
FA.1.22.15	Date and Time of Next Meeting	
	Wednesday 23 rd of February 2022 - 08:30 – 11:00 Microsoft Teams	

**BRADFORD TEACHING HOSPITALS NHS FOUNDATION TRUST
ACTIONS FROM THE FINANCE AND PERFORMANCE ACADEMY – 24th November 2021**

Action ID	Date of Meeting	Agenda Item	Required Action	Lead	Timescale	Comments/Progress
FA21028	24.11.21	FA.11.21.7	Finance and Performance Academy Workplan The dates in the supporting paper for agenda item FA.11.21.14 to be added to the workplan.	Board Secretary/Director of Corporate Governance	26 th January 2022	16.12.21 – <u>Action completed</u>
FA21029	24.11.21	FA.11.21.16	Any Other Business JL to facilitate an F&P Academy development session.	Chair of the F&P Academy	26 th January 2022	
FA21030	26.01.22	FA.1.22.6	Monthly Finance Report MH to detail the flexibilities in the financial plan.	Director of Finance	23 rd February 2022	MH emailed JL re arranging a meeting with Barrie Senior.
FA21031	26.01.22	FA.1.22.7	Budget Setting Process and Timetable February meeting to be extended to 2.5 hours	Trust Secretary/ Associate Director of Corporate Governance	23 rd February 2022	<u>Action completed.</u>
FA21032	26.01.22	FA.1.22.8	Bradford Place and ICS System Financial Update MH to circulate papers.	Director of Finance	23 rd February 2022	Paper circulated on 26.01.22 <u>Action completed</u>
FA21033	26.01.22	FA.1.22.11	Independent Sector Contracts Update MH to circulate paper.	Director of Finance	23 rd February 2022	Paper circulated on 26.01.22 <u>Action completed</u>