

**FINANCE AND PERFORMANCE ACADEMY  
MINUTES, ACTIONS & DECISIONS**

<b>Date:</b>	28 September 2022	<b>Time:</b>	08:30 -10:30
<b>Venue:</b>	Microsoft Teams Meeting	<b>Chair:</b>	Ms Julie Lawreniuk, Non-Executive Director
<b>Present:</b>	<ul style="list-style-type: none"> <li>- Ms Julie Lawreniuk, Non-Executive Director (JL)</li> <li>- Sajid Azeb, Chief Operating Officer &amp; Deputy Chief Executive (SA)</li> <li>- Mr Matthew Horner, Director of Finance (MH)</li> <li>- Mr Chris Danson, Director of Transformation (CD)</li> <li>- Professor Janet Hirst, Non-Executive Director (JHi)</li> <li>- Mr John Holden, Director of Strategy and Integration (JH)</li> <li>- Mohammed Hussain, Non-Executive Director (MHu)</li> <li>- Shaun Milburn, Deputy Director of Operations (SM)</li> <li>- Mr Michael Quinlan, Deputy Director of Finance (MQ)</li> <li>- Terri Saunderson, Director of Operations (TS)</li> <li>- Chris Smith, Deputy Director of Finance (CSm)</li> <li>- Carl Stephenson, Associate Director (CS)</li> <li>- Karen Walker, Non-Executive Director (KW)</li> </ul>		
<b>In Attendance:</b>	<ul style="list-style-type: none"> <li>- Helen Farmer, Act as One Programme Director (HF)</li> <li>- Mark Hindmarsh, Act as One Programme Director (MHi)</li> <li>- Laura Parsons, Board Secretary/Associate Director of Corporate Governance (LP)</li> <li>- Katie Shepherd, Corporate Governance Manager (KS)</li> <li>- Mr David Wilmshurst, Governor (DW)</li> <li>- Ms Amanpreet Kaur, Personal Assistant as secretariat (AK)</li> </ul>		

No.		Action
<b>FA.9.22.1</b>	<b>Apologies for Absence</b>	
	<ul style="list-style-type: none"> <li>- Mr James Taylor, Deputy Chief Operating Officer (JT)</li> </ul>	
<b>FA.9.22.2</b>	<b>Declaration of Interest</b>	
	There were no declarations of interest.	
<b>FA.9.22.3</b>	<b>Minutes of the Meeting Held on the 27 July 2022</b>	
	The minutes of the meeting held on the 27 July 2022 were accepted as an accurate record of the meeting.	
<b>FA.9.22.4</b>	<b>Matters Arising</b>	
	<p>The Academy reviewed the action log. The following actions were discussed and closed:</p> <p><u>FA220016 – Bradford Quality Insight Review Data Pack</u>: It was agreed that Karen Dawber would be invited to attend a future meeting to discuss the key highlights of the Bradford Quality Insight Review Data Pack report. LP to organise. LP confirmed that further to a discussion with</p>	

	<p>Karen Dawber the performance and financial data contained within the report are discussed as routine at the Academy anyway therefore no further action required. Action complete.</p> <p><u>FA220019 – Bradford Place and ICS System Financial Update:</u> MH would circulate the presentation slides delivered on the Bradford Place and ICS System Financial Update to the F&amp;P Academy members. Slides circulated via email 30/08/22. Action complete.</p> <p><u>FA220020 – Any Other Business</u> The Finance and Performance sections would be alternated on the Action complete.</p>	
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	Assurance	
<b>FA.9.22.5</b>	<b>Finance and Performance Academy Workplan</b>	
	The Academy received the work plan of activity for the current year and LP confirmed that the proposed work plan for 2022/2023 will be discussed at agenda item FA.9.22.8.	
<b>FA.9.22.6</b>	<b>Finance and Performance Academy Dashboard</b>	
	The Academy received the Academy dashboard. The metrics that required further discussion would be discussed at relevant points throughout the meeting.	
<b>FA.9.22.7</b>	<b>High Level Risks Relevant to the Academy (to include the Board Assurance Framework)</b>	
	A discussion took place in relation to the new risk “Financial Impact to the Trust from future commodity energy prices”. MH confirmed that the Trust is in contract until the 31st March 2024 which provides protection against the current unstable market condition but this is expected to increase significantly beyond after the contract ends. Due to this it was agreed that the risk needs to remain on the register.	
<b>FA.9.22.8</b>	<b>Academy Effectiveness Review Follow-Up / Terms of Reference Review / Annual Report</b>	
	<p>JL reminded the Academy of the review that took place at the meeting in May using the Mentimeter platform to assess the effectiveness of the Academy and where improvements could potentially be made. The Academy was provided with the outcome of the review at the meeting in June and although some feedback was positive there are areas where the Academy could do better i.e. focussing on improvement. JL, MH, SA and LP have since met to discuss the outcome of the review and have a number of suggestions as detailed within the paper. The Academy supported the suggestions and LP presented the proposed changes to the Terms of Reference.</p> <p>The Academy supported the proposed changes within the Terms of Reference and agreed the draft work plan for 2023 and noted the next</p>	

	steps.	
	<b>Learning and Improvement</b>	
<b>FA.9.22.9</b>	<b>Act As One Programme Update</b>	
	<p>JL welcomed HF and MHi to the meeting and invited them to deliver the presentation. HF and MHI provided an update on the six system transformation programmes as detailed within the presentation and an overview of the next steps for the programme. An update was provided on the operating model and the partnership functions and how the priorities of the programme sit within the partnership governance.</p> <p>JL was pleased to see the improvements and how the work at the trust links across the place partnerships. JL asked the Academy how they felt about continuing to receive future updates in line with the change in the program.</p> <p>KW was appreciative of the update provided felt it was important to continue to receive regular updates at the Academy as these are not provided elsewhere and this is a good way to bring life to the progress being made at Place level in relation to the various programs. JHi agreed and felt it was important to have oversight of the work and also felt that other Academies should also be kept sighted. LP advised that other Academies will receive updates from the System Committees.</p> <p>SA shared the work that is going on at system level and provided some examples on how this is benefiting the Trust, providers and very importantly the patients. SA elaborated on some examples in particular the Assist pathways work which has helped reduced routine referrals. Another example of the impact of the work is the implementation of digital letters for patients through this not only presents a cost saving for the Trust but good for patients and the environment. The final example SA talked about was the Wellbeing Hub which provide good interaction for those who do not require a medical intervention but benefit from the social prescribing.</p> <p>MH added that from a learning and improvement perspective the updates are very useful and suggested that the updates could take place six monthly rather than quarterly to help keep the Academy sighted and close to the work that goes on.</p> <p>Following consensus from all it was agreed that as reporting will be evolving over the coming months a further update will be provided in the next quarter and a discussion will take place to agree whether updates need to continue beyond that and if so how often.</p> <p>JL thanked HF and MHi for delivering the presentation.</p>	
<b>FA.9.22.10</b>	<b>Finance Improvement Plan</b>	
	MH reminded the Academy of the slides presented at the previous meeting which reflected the data from the Finance Report. Item discussed further at agenda item FA.9.22.12 (Monthly Finance Report).	

<b>FA.9.22.11</b>	<b>Performance Improvement Plan – Urgent &amp; Emergency Care</b>	
	<p>SA welcomed SM to provide the quarterly update on Urgent &amp; Emergency Care (UEC).</p> <p>SM advised that some aspects of the improvement plan have been paused for a number of reasons including due to the new management structure and consultation period as well as the impact of recruitment within the Transformation Team.</p> <p>SM talked through the slides and provided detail in relation to the transformation of UEC, proactive approach to performance management, areas of focus (admitted patient pathway in particular), ward metrics, progress to date, what will happen next and current performance and a look ahead at the new standards.</p> <p>One of the key areas of work was to work closely with the newly established Clinical Service Units (CSUs) to do the following:</p> <ul style="list-style-type: none"> <li>• Improve accuracy on estimated date of discharge</li> <li>• Develop plans and ideas to improve timeliness of discharge (discharge lounge for surgery)</li> <li>• Identify alternatives to admission and/or pathways that avoid AED attendance for speciality patients including virtual models</li> <li>• Share info by specific ward areas and to develop an improvement plan to achieve the 1 hour clinically ready to transfer admission standard by 2024</li> <li>• 12hr decision to admit admission breaches are subject to an RCA by the appropriate CSU</li> </ul> <p>SM advised that focus will be given to achieving earlier discharges from wards. A discharge lounge will be trialled for “fit to sit” patients who are ready for discharge but waiting for medication to take out (TTO) or transport. MHu raised his concerns about the delay in TTOs and asked what can be done to improve this. SA explained that the solution to this was for wards to alert pharmacy early on in the day or if possible the day before that TTOs are required in order to avoid patients being delayed. SA advised that the team is keen to adopt the GIRFT principle (Get it Right First Time) approach opposed to sending patients home without medication. A detailed discussion continued in relation to cut off times for TTOs and ways that this is being addressed to ensure patients can be discharged in a timely manner. SA confirmed that comments and discussions from today will be taken on board and considered as part of the improvement work.</p> <p>A further discussion followed in relation to education and training as well. It was agreed that MHu would raise this at the Quality &amp; Patient Safety Academy in the afternoon.</p> <p>SM shared the data for August to September which demonstrates significant improvement on metric as detailed within the presentation.</p>	<b>MHu</b>

	<p>These includes over 50% patient discharged before 4pm which is a huge achievement, reduced patients waiting for a bed and total time in AED for admitted patients reduced by 90 minutes.</p> <p>SA referred to the upcoming Act as One Week which will provide a good understanding of what can be achieved and how this will be implemented for the Winter period. The Winter Plan is currently being finalised and will be discussed at the upcoming Board Development Session on the 13 October. The three key areas of focus are ambulance handover, flow of the hospital by reducing bed occupancy and no criteria to reside (seeking a 30% reduction).</p> <p>JL thanked SA and SM for the detailed presentation and indicated how useful it is for the Academy to see how the Trust is improving within performance metrics and importantly how this impacts on patient experience.</p>	
	<b>Finance</b>	
<b>FA.9.22.12</b>	<b>Monthly Finance Report</b>	
	<p>MH presented the report and advised that the Trust has reported a cumulative breakeven Income &amp; Expenditure (I&amp;E) position for the year to Month 5, which is in line with the plan and the Trust continues to forecast delivery of a breakeven position at year end. MH reported that there was a £1m adverse swing in the I&amp;E position in Month 5, which has resulted in a cumulative underlying deficit of £0.3m. MH advised that the vast majority of the change in Month 5 relates to increased drugs expenditure, some of which relates to delayed invoices for prior months and the distribution of a number of expensive drugs in August – this is being looked into to see what has contributed to this happening as the same may also be the case for September.</p> <p>MH reported that it was originally planned to utilise around £5 million of non-recurrent measures at the end of Month 5 to support the position. The actual run rate has been better than originally planned and as such the non-recurring measures have not been utilised. This has provided a degree of headroom as we move into the second half of the year as expenditure is expected to increase as a result of winter, recruitment plans and approved service developments. The planning round for 23/24 will commence in the next and the implications of the issues identified will need to be factored in the underlying planning assumptions.</p> <p>MH referred to the second page of the report and indicated that the bridge chart demonstrates the combined favourable variances to plan, excluding the deployment of non-recurrent support amount to an underlying position approximately £4.6m better than planned. In this context, it has only been necessary to deploy £0.3m of the £4.9m planned flexibilities. The position is supported by £1m of non-NHS income in excess of plan and £0.2m of non-recurrent benefits relating to the previous financial year arising in the CBUs. Covid expenditure is £0.9m lower than the plan inclusive of a £4.8m annual cost reduction target. Expenditure on insourcing and outsourcing capacity for Elective</p>	

	<p>Recovery is £2m below budget, which suggests activity delivery may fall below plan, although the extent of this potential shortfall cannot be accurately quantified at present.</p> <p>MH explained that the majority of clinical and non-clinical departments are reporting underspends at the end of Month 5. However, the number of clinical departments reporting in-month overspends has again increased in August. The Urgent &amp; Emergency Care (UEC) CBU has the ongoing overspend which mainly relates to pay expenditure in the use of Locum and agency staff. The CBU have been asked to provide a sustainable workforce plan.</p> <p>MH talked through the slides in relation to the financial improvement plan and the targets that were set and what has been achieved to date and confirmed that we remain a little short of identifying the full total. MH advised of the challenge the Trust faces as it moves into 2023/24. The plans require the CSU's to identify a recurrent£5.3m improvement in Quarter. The projected run rate indicates a £4m gap for that Quarter, which would translate into an additional £15 million challenge next year. Attention needs to be focussed on Quarters 3 and 4 given where we are with the overall improvement in the current year. MH emphasised the importance of converting the non-recurrent measures into recurrent measures in order to improve our exit run rate from 22/23.</p> <p>MH explained that he and his team fully appreciate the challenge faced and discussions have been taking place to determine what could be done differently to improve the position. MH shared a proposal to create a resource pack specifically for use by CSUs and Corporate Departments focuses purely on use of resources. This would complement the work that is being undertaken through the Improving Clinical Services Group but is a dedicated piece of work on signposting productivity and efficiency opportunities. This will mean undertaking a detailed piece of work in relation to consultant Job Plans, clinic utilisation, clinic templates and theatre utilisation and comparing this to 2019/2020 to identify what has changed and whether that is signposting towards an opportunity from a productivity and a financial improvement perspective. MH highlighted that this is quite a big piece of work and support will be needed from HR, BI and the Performance team as well as the CSUs themselves. In the first instance MH proposed that he will discuss this with Executive Team for their support as it is very important to have agreement from all areas to have the best chance of achieving this. MH advised that if this goes ahead, Quality Impact Assessments will be undertaken to make sure quality and safety is maintained throughout so there is no detriment to patient care. MH wished to take the opportunity to thank his team who helped identify the proposed next steps.</p> <p>JL thanked MH for the detailed update and asked if the Academy could have a look at the proposed pack to understand it from an improvement perspective and what scope it offers.</p>	<p><b>Director of Finance</b></p>
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<b>FA.9.22.13</b>	<b>Procurement Update</b>	
	<p>MQ presented the update and made the following key points:</p> <ul style="list-style-type: none"> <li>The last Procurement Oversight Group was cancelled due to the additional bank holiday. The meeting has been rearranged and is now scheduled for 21 November 2022. A draft procurement risk register is attached at Appendix 1. The completion and scoring of the risks will be agreed at the procurement oversight group.</li> <li>Work is being undertaken to establish a Contract Register. A contract manager has been recruited to maintain and implement this register (start date to be confirmed).</li> <li>Scan4 Safety - there has been significant progress, however the roll out of the Inventory Management System has been delayed. Further progress within 3-4 months.</li> <li>MQ referred to the Learning and improvement and explained that the Procurement Department had undergone an Internal Audit and had received a high assurance opinion.</li> </ul> <p>MH explained that the report provides an overview of the current position but also responds to questions that both JL and Barrie Senior had raised previously when the procurement strategy was presented to the Board of Directors for approval particularly in terms of establishing a work plan.</p> <p>JL was pleased to see the progress made so far. JL commented that there are still some strategic issues in their value for money versus resilience and supply and asked if the Procurement Oversight Group will be looking at this and whether an update can be provided to the Board of Directors as these are important issues. MH agreed and said that he would expect that following a discussion at the Procurement Oversight Group the recommendations will be presented to this Academy following which it would be reported to the Board of Directors.</p> <p>The Academy noted the update.</p>	
<b>FA.9.22.14</b>	<b>Draft Budgetary Management Framework</b>	
	<p>MH explained that this paper was approved by the Academy in 2019. Amendments have been made to reflect the new organisational structure. In particular the updates are in relation to the roles of the Clinical Directors and the nursing functions to clarify roles and responsibilities in relation to budgetary responsibility. Therefore the paper is presented for approval. MH welcomed CSm to present the paper.</p> <p>CSm referred the Academy to the Budgetary Accountability Hierarchy on page 9 of the report. CSm explained that one of the main purposes of the document is to strengthen the standing financial instructions and the scheme of delegation to make it more operationally focused to provide</p>	

	<p>clarity to those that manage budgets and expectations. CSM explained that the chart sets out the budgetary accountability flows within the new CSU structure. CSM talked through the hierarchy of the structure and how the reporting mechanisms work to ensure there is Board of Director oversight.</p> <p>SA referred to the Accountable Officer role and the importance of this as Executive to CSU meetings are focused on sections of quality, workforce, finance and performance. SA said that TS has been fundamental in terms of helping establish the structure and sometime will be needed for the new structure to be fully established.</p> <p>TS wished to support MH's earlier proposal in relation to the information packs and welcomed these as they will be fundamentally important in terms of advising the Clinical Directors on the areas that they need to focus on. The Clinical Directors can influence the spend whilst also having responsibility for managing the finances and there is still a lot of work to do with the Clinical Directors to help them understand the position. Clinical Directors are able to influence decision making which means that the right decisions can be made to ensure quality and safety whilst understanding what they are spending the money on.</p> <p>CSM said that one of the key objectives of the Finance Business Partners and their teams is to work very closely with the Clinical Directors and impart as much knowledge to them as possible to help them manage their budgets. CSM reported that the previous version of the document had the care groups above the CSU's and that is no longer the case. The document explains that there is a senior support team to help each CSU within the service areas to provide assurance and that they are there to support them and not manage them.</p> <p>JL reflected that the earlier conversations in relation to the Finance Improvement Plan links to the new structure and the CSU Clinical Directors and felt she now has real insight into how budgets will be managed and how improvements will be made.</p> <p>The Academy agreed that the document could be approved in the interim, subject to the additional work that needs to be completed. To be submitted to a subsequent Academy meeting for final sign off.</p>	<b>Deputy Director of Finance</b>
	<b>Performance</b>	
<b>FA.9.22.15</b>	<b>Operational Performance Highlight Report</b>	
	<p>CS presented the slides and made the following key points:</p> <ul style="list-style-type: none"> <li>• Inpatient activity for elective ordinary and day cases remained behind plan in August 2022 and was projected to reduce slightly in September 2022.</li> <li>• Referral to treatment performance had increased back to previous levels in August 2022 at 72.19%.</li> <li>• The total waiting list continued to grow despite completed pathways being ahead of plan with the number of new pathways increasing.</li> </ul>	



	<ul style="list-style-type: none"> <li>The 104+ week position remained static, predominantly due to treatment delays as a result of patient choice to be treated after the summer holidays.</li> <li>Diagnostic performance for August 2022 was reported as 80.47% with a projection that this would increase for September 2022 to 81.20%</li> <li>MRI capacity continued to be impacted due to a loss of scanning capacity due to a mechanical issue.</li> <li>The Trust reported 91.40% compliance against the cancer 2-week-wait standard in August 2022. This was against a target of 93%.</li> <li>The Trust reported 78.32% compliance against the cancer 28-day faster diagnosis standard in August 2022, against a target of 75%.</li> <li>The Trust reported 79.14% in August 2022 for the cancer 62-day first treatment standard. It was projected that this would increase to 83.24% for September 2022. This was against a target of 85%</li> <li>Ambulance turnaround performance had improved over the previous two months due to improvements seen in patient flow within the Emergency Department.</li> </ul> <p>JL thank CS for the update.</p>	
<b>FA.9.22.16</b>	<b>Performance Report</b>	
	Covered in agenda item FA.9.22.16	
<b>FA.9.22.17</b>	<b>Learning from Each Other</b>	
	<p>CD presented the paper and explained that Learning from Each Other is an established template used to summarise learning from change projects and service improvement trials. CD reported that in 2019 a collection of Improvement projects was first compiled under the title of "Learning from Each Other" (LfEO). Based on the success of the original idea it was felt appropriate to again compile a showcase of similar learnings from the past two years and to ensure this is repeated annually. Suggestions have been harvested from a wide range of sources (including but not limited to Informatics, Finance, Estates &amp; Facilities, Organisational Development, Quality Improvement and Clinical Service Units) with a view to celebrating success and sharing learnings across the organisation. This compendium of Improvement Learning is intended to embody our Trust values and behaviours, help spread the improvements, learning and achievements taking place and support our Academy structure purpose, to seek assurance, learn and drive improvement.</p> <p>CD felt that this document would be useful to share at any future joint Academy activities in terms of focussing on improvements in learning rather than the assurance pieces that are tackled in individual academies.</p> <p>JHi thanked CD for sharing the document and said she found it incredibly helpful and agreed that this is a good insight into seeing the marginal gains which are really important to the Trust and the document serves as a reminder of the human effort that is put into some of the</p>	

	issues.  JL thanked the author for the efforts that had gone into the production of the booklet.	
<b>FA.9.22.18</b>	<b>Any Other Business</b>	
	There were no other items of business.	
<b>FA.9.22.19</b>	<b>Matters to Share with Other Academies</b>	
	JL felt that the Risk register reflects the discussions that have taken place today. There were no matters to escalate to other Academies other than the discussion in relation to FA.9.22.11 which MHu will discuss at the Quality Academy later today.	
<b>FA.9.22.20</b>	<b>Matters to Escalate to Board</b>	
	There were no matters to escalate to the Board.	
<b>FA.9.22.21</b>	<b>Date and Time of Next Meeting</b>	
	26 October 2022, 08:30-10:30	

**BRADFORD TEACHING HOSPITALS NHS FOUNDATION TRUST  
ACTIONS FROM THE FINANCE AND PERFORMANCE ACADEMY – 28 September 2022**

Action ID	Date of Meeting	Agenda Item	Required Action	Lead	Timescale	Comments/Progress
FA220019	28 Sept 2022	FA.9.22.11	<b>Performance Improvement Plan – Urgent &amp; Emergency Care</b> A further discussion followed in relation to education and training as well as who can prescribe the flow of prescriptions to pharmacy. It was agreed that MHu would raise this at the Quality & Patient Safety Academy in the afternoon.	Mohammed Hussain, Non-Executive Director	September 2022	
FA220020	28 Sept 2022	FA.9.22.12	<b>Monthly Finance Report</b> JL thanked MH for the detailed update and asked if the Academy could have a look at the proposed pack to understand it from an improvement perspective and what scope it offers.	Matthew Horner, Director of Finance	October 2022	
FA220021	28 Sept 2022	FA.9.22.14	<b>Draft Budgetary Management Framework</b> The Academy agreed that the document could be approved in the interim, subject to the additional work that needs to be completed. To be submitted to a subsequent Academy meeting for final sign off.	Michael Quinlan, Deputy Director of Finance	November 2022	
FA220017	27 July 2022	FA.22.7.9	<b>Financial Improvement Plan</b> It was agreed that a Clinical Business Unit be selected to attend a future Academy meeting to discuss their approach towards improvement. MH would liaise with James	Matthew Horner, Director of Finance	January 2023	MH advised that as the new CSU structure has been implemented on 5 September therefore it was agreed that a CSU is invited

			Taylor and Sajid Azeb to determine when would be the most appropriate time to do this.			to a meeting in January 2023 to give them to embed into the new structure.
FA220018	27 July 2022	FA.22.7.13	<b>Prioritising Learning Disability Patients</b> Following a request from the Chair, it was agreed that a more detailed analysis would be provided to a future Academy meeting on progress against the workstreams and transformational activity undertaken relating to the prioritisation of patients with learning disabilities. James Taylor would determine a date that this would be appropriate to be presented.	James Taylor, Deputy Chief Operating Officer	February 2023	SA confirmed that the waiting analysis has been completed but the reports need to be run over the coming months to present the outcome of the data.
FA220022						