

| Report to: | Trust Board (Public) | Agenda item: | 9 |
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| Date of Meeting: | 7 February 2018 | | |

| Committee Name: | Finance and Performance | | Committee Meeting Date: | 18 th December 2018 |
|-----------------------------|-------------------------------------|------------|----------------------------|-----------------------------------|
| Status: | Information | Discussion | Assurance | Approval |
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| Prepared by: | Paul Miller, Non Executive Director | | | |
| Board Sponsor (presenting): | Paul Miller, Non Executive Director | | | |

Recommendation

To note key aspects of the Finance and Performance Committee meeting of the 18th December 2018.

Items for Escalation to Board

Operational Performance – Emergency Department (ED) performance as measured by the 4 hour target (95%) was still below target at 87.7% in November and 91% for the 8 months up to the 30th November 2018. At the November F&P the committee received an action plan to improve performance within ED (the front door to the hospital) and at the December 2018 meeting the committee received a paper aimed at improving flow within the hospital. A key issue arising from this flow paper is the decision of the CCG and the Trust to appoint Gavin McDonald as a Winter Director to support the South Wiltshire System.

Deep dive outpatients – The committee received a detailed report on key current and future issues in outpatient services. However a key issue to resolve going forward is the future business model for hospital outpatients is it (a) to reduce DNA's, increase productivity and throughput thereby increasing activity, as measured by attendances, and get more PBR income or (b) to completely transform the service by empowering patients to self manage, increase digital outpatient services and support the wider clinical team (including primary care). All of which may lead to reduced hospital attendances, but also reduce our pressures on capacity and release resources.

Financial Performance as at 30th November 2018 and Outturn Forecast 2018/19 – The financial position as at month 8 showed the Trust to be £1,184 behind our planned deficit i.e. an actual deficit of £7,059m. Note the original in-year plan for 2018/19 agreed with NHSI, was to end the year with a deficit of £9m, which required cash borrowing of £5.2m.

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On the 18th December 2018 the Committee also received an updated month 8 draft forecast for 2018/19 which showed a range of possible year end outturns (without additional mitigations) of between £12.9m and £13.9m. In light of his update the committee also received and supported a cash flow paper, which requested £6.4m of additional cash borrowing on top of the original £5,2m. This £6.4m arose from £3.5m anticipated additional in-year deficit and £2.9m forecast loss of Provider Sustainability Funding (PSF).

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| Report to: | Trust Board (Public) | Agenda item: | 9 |
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| Committee Name: | Finance and Performance | | Committee Meeting Date: | 22 nd January 2019 |
|-----------------------------|-------------------------------------|------------|----------------------------|----------------------------------|
| Status: | Information | Discussion | Assurance | Approval |
| | | | ✓ | |
| Prepared by: | Paul Miller, Non Executive Director | | | |
| Board Sponsor (presenting): | Paul Miller, Non Executive Director | | | |

Recommendation

To note key aspects of the Finance and Performance Committee meeting of the 19th January 2019.

Items for Escalation to Board

Operational Performance – Emergency Department (ED) performance as measured by the 4 hour target (95%) was still below target in December at 93.3%, but this was a significant improvement on the November performance which was 87.7% and the 9 months cumulative performance up to the 31st December 2018 now stands at 91.3%. This is a very good performance over the Christmas period, but it is essential that ED performance and the flow of "urgent care" patients through the hospital continues to improve and the Committee will continue to closely review the associated improvement operational action plans on a monthly basis.

Deep dives on aligning demand, capacity and workforce planning and nurse staffing

– The committee received two presentations on the above, firstly the committee were assured that the Trusts operational planning process for 2019/20 will align demand, capacity and workforce on both a bottom up and top down basis. With the latter being key, as the Trust is experiencing a number of significant workforce challenges and these vacancies may constrain on our ability to deliver the demand anticipated. Secondly the committee, were also assured that there is an effective process for aligning the number of nurses required in a particular clinical area and the number of nurses rostered to cover those shifts. Finally the committee saw evidence that assured us that the gap between the nurses we employ (including bank) and our workforce demand was reducing. However until such time as the gap is minimised the financial benefits of reduced sickness and reduced agency spend maybe delayed.

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Gastroenterology consultant medical staffing review and plan for service sustainability – the committee discussed a paper, which outlined a series of service challenges in the short, medium and long term. The risks and issues were discussed and the Executive team confirmed that they were in the process of completing an action plan (which would have cost implications), which aimed to ensure that this key service continued to be sustainable.

Financial Performance as at 31st **December 2018 and Outturn Forecast 2018/19** – The financial position as at month 9 showed the Trust to be £1.712m behind our planned deficit i.e. an actual deficit of £8.824m. Note the original in-year plan for 2018/19 agreed with NHSI, was to end the year with a deficit of £9m, which required original cash borrowing of £5.2m. Finally it was noted that the Trust Board discussed the month 9 year end financial forecast at its meeting on the 17th January 2019 and were content that the updated forecast shows a deficit of £10.6m, which is £1.6m worse than the original plan.

2019/20 Business Planning – The committee received a briefing on the recently released NHSE/NHSI planning guidance for next year, including an update on contract negotiations with Commissioners and our NHSI financial control total for 2019/20. The Committee expressed cautious optimism at this early stage of the operational planning process. However based on current assumptions and plans, the achievement of the 2019/20 financial control total was likely to require a CIP next year of in excess of £9m.

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