

Item 6.1.2.1

## Integrated Performance Committee

minutes

### Minutes of the Integrated Performance Committee Meeting held on Monday 30<sup>th</sup> October 2017

<b>Present:</b>	Marion Savill David Bricknell Mark Jones	<b>Non-Executive Director (Chair)</b> Non-Executive Director Non-Executive Director
<b>In Attendance:</b>	Frankie Morris Hayley Kendall  Jennifer O'Brien Claire Wilson	Deputy Chief Finance Officer Divisional Head of Operations- Surgery & Clinical Services Secretary Chief Finance Officer
<b>Apologies for Absence:</b>	Tony Wilding Darren Sinclair	Director of Strategic Partnerships & COO Non-Executive Director

	Action
<b>1. Apologies for Absence</b>	
As noted above.	
<b>2. Declarations of Interest Relating to Agenda Items</b>	
None declared.	
<b>3. Minutes of meeting held on 24<sup>th</sup> July 2017</b>	
Noted and approved.	
<b>4. Action Log</b>	
<b>Item 1</b> -This item was covered within the Finance Report under agenda item 5.1. This item would be marked as complete and removed from the action log.	
<b>Item 2</b> -This item was discussed within the Performance Report under agenda item 5.2. This item would be marked as complete and removed from the action log.	
<b>Item 3</b> -It was thought that under the upcoming review of assurance	

committees by the internal auditors, there would no longer be a need for a separate Cancelled Operations Report as this forms part of the Performance Report; therefore this item was considered under agenda item 5.2 & 5.3. This item would be marked as complete and removed from the action log.

**Item 4-**It was confirmed that the RAG rating items listed under 'activity' on the Strategic & Ops Dashboard had now been reviewed. This item would be marked as completed and removed from the action log.

**Item 5-**The closing Aged Debtor Report was seen within the Finance Report under agenda item 5.1. This item would be marked as complete and removed from the action log.

**Item 6-**This item was covered within the Reference Costs Update under agenda item 6.1. This item would be marked as complete and removed from the action log.

## **5. 2017/18 Financial / Performance Reporting**

### **5.1 Month 6 Finance Report (incl. Capital)**

The report was noted as read by all members, with the Chief Finance Officer (CFO) highlighting the following;

- The Welsh HRG4+ tariff dispute remained the greatest concern and would be discussed at the BoD Meeting on Tuesday 31<sup>st</sup> October 2017 as there had been no change since the last update was given to Integrated Performance Committee (IPC) members in July 2017.
- The forecast section of the report was more substantial which gave further context to the Trust's current position. The Trust was currently on track to deliver forecast and all STF monies, assuming the Welsh issue can be resolved.
- Section 13 of the report outlined the risks for consideration, although these were not built into forecast as they weren't firm at this stage, the finance department would continue to monitor them. It was noted that based on the latest forecast there was still £1.6m. reserves to help mitigation. A detailed forecast was provided under appendix 5 of the report.
- It was noted that there needed to be a complete bed capacity review to underpin next year's plan.
- Due to the late notification last year of a failure on one of the Knowsley KPI's, Finance had made a prudent assumption that this year, half of the KPI's would be delivered whilst half would fail. Although the CFO did consider this a low risk.
- The costs to the Trust in relation to the leadership role in the Cheshire & Merseyside STP continued to be an unfunded pressure, currently forecast at £85k for the year.
- The expectation was that agency spend would remain within the cap for the full year, although keeping in mind the emerging pressures of winter staffing levels and staffing levels in the informatics department.

**TW/CW**

- The CFO reported that historic debt issues were being progressed and good progress was being made. It was noted that the provision of bad debt would need to be reassessed at year end.
- The cash flow forecast assumed full delivery of the income and expenditure plan, however it may be further affected by the recognition of the £0.926m Royal Liverpool & Broadgreen debtors settlement in October 2017, the receipt of the cash settlement regarding the on-going negotiations with the Welsh Health Specialised Services Committee, the acceleration of capital spend activity in quarter 3 regarding the purchase of the surgical robot along with the implantation of the IT network storage and the receiving of Q2 & Q3 STF funding in December 2017 and January 2018.

In conclusion, the Committee noted the financial position of the Trust for the period to 30 September 2017, including the use of reserves. The Committee also noted the assurance provided that the full year forecast would be achieved and STP moneys secured, based on the analysis of risks and mitigation available, subject to resolution of the Wales HRG 4+ issue.

## 5.2 Month 6 Performance Report

The report was noted as read by all IPC members with the following points noted;

- At the end of Month 6 the Trust delivered a performance of 92.19% against the RTT target of 92%
- Following the failure of the 18 week pathway targets for incomplete pathways during quarter 2 for cardiac surgery, the surgical division had a continuous plan in place to reduce the number of patients waiting longer than 18 weeks, thus improving pathways and referral quality.
- The Trust's cancer performance for quarter two and year to date were compliant with all five NHS Improvement targets with 100% performance being achieved in month 6.
- The introduction of a consultant ward round following surgery had improved patient discharge times.
- Clarity over what was reported in the Performance Report was requested with members agreeing that the format needed to work for both the IPC and BoD and clearly show the indicators which were regulatory.
- The need for having a full RTT model in place to provide further assurance on current and forecast performance was an area currently being looked into.
- IPC members noted the overall compliance with key regulatory targets.
- The committee was informed that a recovery plan was being submitted to the Executive Meeting on Wednesday 1<sup>st</sup> November 2017, due to the decrease in activity within the Medicine division. Although there was nothing of concern to raise with the BoD at this stage.
- Members were informed that not achieving the Cancelled

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Outpatient Appointments by Provider target should not cause alarm as the figure shown was affected when the Trust simply changed the appointment by 5 minutes, so this indicator could be misleading.

- Although the monthly figures for Theatre Utilisation were low compared to previous months; which were affecting the YTD position, the theatre utilisations were currently performing above the target including overrun but underperforming for excluding overruns. This was nothing of concern at this stage.

The committee noted that the Trust were reaching all of the targets imposed, although stated that there was still work to do in some areas including clarification of what was reported in the performance report to IPC and BoD, and evidence based forecasting of future performance and compliance. It was noted that the current review of the Informatics function would inform developments in these areas.

### **5.3 Cancelled Operations Report**

It was noted that as part of the internal auditors' review into assurance committees it was likely that providing the cancelled operations report as a separate entity would no longer be needed as the information already formed part of the performance report seen by both the IPC and BoD.

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The only issue to note was the amount of out of hours surgery, mainly aortic, performed in September 2017. This activity would be reviewed in order to identify any trends so that where possible, predictions in activity could be made. If the current level of aortic emergencies turned out to be a longer term trend, then the Trust would have to find a solution to accommodate this.

### **5.4 Month 6 Workforce Report**

This report was provided for information only with the contents of the report noted by all Committee Members.

### **5.5 CIP Progress Update**

A correction was noted on page two of the paper, the last bullet point should read Coronary Care rather than Critical Care.

The shortfall against the CIP target was noted by Committee members. However the CFO did state that each Division had been asked to do remedial works to identify anything that could ensure the gap of £400k would be met by the end of the financial year. The pressure was also continuing through the Business Transformation Strategy Group (BTSG) as it was thought that there were more savings to be made in a number of key areas.

Committee members expressed their disappointment that CIPs remained below target given the work which had gone into the process this year, and commended the CFO on her commitment to identify new schemes to mitigate the position during the remainder of the year, and prepare for next year.

## **6. 2017/18 Planning**

### **6.1 References Costs Update**

The committee noted the assurance provided in this paper around the process in place to support accurate and timely production of reference costs in line with NHS Improvement requirements. It was agreed that more work needed to be done relating to patient level costing data, as highlighted in the presentation to the Committee in June.

It was noted that this piece of work highlighted specific areas of investigation where the Trust was an outlier of its costs. This could be due to a number of possible causes, and could potentially identify CIP opportunities, or threats to future income, or issues with the underlying data and comparisons.

Further work needed to be done, and an update would be provided at the IPC meeting in January 2018 following discussion of the Informatics Review at the November 2017 BoD meeting.

### **6.2 Carter Update Report**

The committee noted this report as an exemplary piece of assurance for the members with clear and concise information.

## **7. Governance**

### **7.1 Business Transformation Steering Group Approved Minutes & Update**

The minutes were noted by the Committee. Concern was raised over the quoracy of the meeting due to lack of clinical representation, it was confirmed that the Chair of the BTSG was in the process of recruiting another clinician since the previous representative left the Trust.

### **7.2 Forward Look Work Programme Review**

Committee members were satisfied that work was being carried out per the work programme schedule.

## **8. Date and time of Next Meeting:**

Monday 29<sup>th</sup> January 2018 at 10.00am – 12:30pm, Boardroom