





		Agenda Item	
Freedom of Information Status		Open	
Reporting Committee	Performance and Finance Committee		
Author	Liz Stauber, Interim Head of Corporate Governance		
Chaired by	Reena Owen, Independent Member		
Lead Executive Director (s)	Lynne Hamilton, Director of Finance		
Date of last meeting	17 December 2019		

Summary of key matters considered by the committee and any related decisions made.

- Performance (including targeted intervention areas)

As part of the *unscheduled care performance* discussion, it was noted that the service remained under significant pressure, but there were fewer attendances and admissions to the emergency departments in November 2019 compared with October 2019, however a 20% increase in acuity had been evident. The four-hour target was 1% off profile in November 2019 at 73.22%. An increase had also been evident for the 12-hour waits.

Stroke performance remained stable with **cancer** access reaching 83% for non-urgent and 84% for urgent cases.

Planned care performance continues to be significantly affected by the operational pressures, with the number of patients waiting more than 36-weeks for treatment at 4,587 in November 2019 compared with 1,801 in March 2019. The diagnostics position continued to improve and work was ongoing to reduce the number of patients waiting more than 52-weeks for treatment.

In relation to *healthcare acquired infections*, all measures were performing well, with only *clostridium difficile* off target due to a specific outbreak

- Performance and Finance Committee Risk Register

The health board risk register had been considered at Audit Committee and board level with the next steps to be a be-spoke version for each committee to consider the risks assigned to its remit. Members discussed the risks assigned to the committee and agreed relevant changes.

Key risks and issues/matters of concern of which the board needs to be made aware:

- Financial Position

The latest in-month position was an overspend of £1.19m and a cumulative of £9.84m, against a revised forecast position of a deficit of £12.3m, but this was not without risk. Core savings performance was better than previous years and was being delivered in the context of unprecedented operational pressures. Control totals had been set for units and executive directors, and the Chief Executive was to re-issue the allocation letters, with recovery actions being monitored on a weekly basis.

- Continuing Healthcare Quarter Two Performance Report

Health boards were required to receive a quarterly report setting out continuing healthcare. Performance. A 'deep dive' was being undertaken in relation to children's needs as to what constituted health responsibility and what should come under the local authority remit, and the same process would be completed for mental health and learning disabilities. KPMG, the external financial support commissioned by Welsh Government, was to undertake detailed work in relation to continuing healthcare to streamline and improve the process through a comprehensive action plan. It was agreed the next iteration would include an update on the work being undertaken nationally to develop a framework.

- Planned Care Performance Speciality by Speciality

Within the original sustainable planned care plan for 2019-20, there had been an option to reduce the backlog of patients waiting more than 36 weeks for treatment to 938. Performance was not where it needed to be as a result of operational pressures and pension taxation charges. Orthopaedic cases were holding at around 900-1,000 cases but there had been a reduction of around 70 cases this year compared with previous years, and the ring-fenced ward had been protected since November 2019, with some outsourcing plans also in place. Welsh Government had allocated £6.5m for planned care which was at risk of clawback if delivery was not achieved.

Delegated action by the committee:

No delegated action was taken by the committee.

Main sources of information received:

- Integrated performance report;
- Monthly financial monitoring report;
- Continuing healthcare quarter two performance report
- Planned care performance speciality by speciality
- Monitoring report;
- Efficiency framework.

Highlights from sub-groups reporting into this committee:

No reports were received from sub-groups.

Matters referred to other committees

The increase in safeguarding cases was to be referred to the Quality and Safety Committee.

Date of next meeting 28 January 2020
