





		Agenda Item	2.5 (ii)	
Freedom of Information Status	Open			
Reporting Committee	Performance and Finance Committee			
Author	Claire Mulcahy, Corporate Governance Manager			
Chaired by	Reena Owen, Inc	lependent Member		
Lead Executive Director (s)	Darren Griffiths, I	nterim Director of Financ	ce	
Date of last meeting	24 November 202	20		

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

### Monthly Performance Report

COVID-19 cases were continuing to rise and bed occupancy for cases had reached over 300, which highlighted the pressure in the system. Red responses were consistently good with performance at 68.5%, which was best in Wales. Four-hour performance for unscheduled care stood at 76% for November due to increased emergency admissions. The infection control position for October remained steady with the exception of E.coli, Klebsiella and Pseudomonas cases that had increased. Referrals in the planned care system were now at pre-COVID levels and the number of patients waiting over 36 weeks now stood at 30,000. Breaches for cancer diagnostics over 8 weeks showed a period of stability and members were pleased with this but it was important to note that demand was increasing and this position was being monitored carefully.

Members were reminded of the increased pressure in all areas of the system; the 2<sup>nd</sup> wave position was different from the 1<sup>st</sup> wave where the system faces pressures in planned care, unscheduled care and COVID-19. Staffing levels appeared to be stable but the pattern differed from the 1<sup>st</sup> wave in that there was now an increase in services being provided and a turnover of staff.

### Quarter Two Operational Plan Delivery of Actions

The paper provided a high level summary of the completed, on-track and off track actions and detailed feedback on the off-track actions including revised milestones. Overall there was a good level of progress achieved and delivered against the milestones. There were now only two actions that remained off-track at the end of quarter; the finalization for the move for staff within Child and adolescent mental health services (CAMHS) and the implementation of the Welsh Community Care Information System (WCCIS).

#### KPMG Update

An update on the health board response to the KPMG action plan was provided to committee with updates on the four elements of the report; An assessment of the financial grip and control; an assessment of the 2019/20 financial plan; an assessment of the recovery plan, an assessment of the governance and broader delivery framework. Members were pleased with the good progress made against the action plan with just a few areas to address. In terms of the recovery plan, members highlighted the need keep focus on savings projection

figures, particularly those within workforce efficiencies but acknowledged that a substantial amount was based in service changes which had proved difficult under the current pressures.

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

## Savings

The agreed financial plan for 2020-21 indicated a £24.4m year-end deficit and a £23m savings delivery requirement. The report outlined the distribution of the savings plan and current forecast delivery of £5.78m. The impact of COVID-19 had meant that the improvements planned for surge, flow, theatres and outpatients in particular had been difficult to realise. Despite these challenges, the report highlighted the additional work underway within these areas to chase down further opportunities for savings.

#### Financial Position

Members were advised that the cumulative overspend for month 7 stood at £14.285m with movement in-month of £2.016m. The year-end financial forecast at month 7 had been reduced to £25.231m following the allocation of £1m funding to support surge capacity. Welsh Government had formally recognised this forecast was a deliverable outturn but important to note that the vaccination plan would affect this forecast in terms of funding and expenditure with the retention of the Bay Hospital. The £48.2m Welsh Government allocation for COVID-19 gave a truer reflection of the financial position for month 7. In terms of the capital position, confirmation that the Singleton cladding costs would be covered by Welsh Government therefore some opportunities within the capital plan had been reinstated.

# Planned Care

The report provided an update on the key activities underway to improve the scheduled care system. The recovery and design of outpatients services and the development and delivery of surgical services were both in line with the Welsh Government guidelines for essential services and surgical prioritisation. Members raised their concern about the lack of private capacity available to the health board and how the health board was being disadvantaged in comparison to other health boards in terms of how this was being commissioned. Members were advised that this had been escalated to Welsh Government and work was underway to address this.

## Delegated action by the committee:

No delegated action was taken by the committee.

## Main sources of information received:

- Performance report;
- Report on the Quarter Two Operational Plan Delivery of Actions;
- KMPG report;
- Finance report;
- Update on Savings;
- Planned Care report.
- Financial Monthly Monitoring Returns

# Highlights from sub-groups reporting into this committee:

No reports received from sub-groups.

## Matters referred to other committees:

No items referred to other committees.

Date of next meeting15 December 2020



		Agenda Item	2.5	
Freedom of Information Status	Open			
Reporting Committee	Performance and Finance Committee			
Author	Claire Mulcahy, Corporate Governance Manager			
Chaired by	Reena Owen, Independent Member			
Lead Executive Director (s)	Darren Griffiths, Interim Director of Finance			
Date of last meeting	15 December 2020			

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

#### Financial Plan

Members received a verbal update on the financial plan for 2021/22. The NHS Wales Annual Planning Framework for 2021/22 had been received and was being work through. The document advised that the draft budget would be published later than usual and the allocation letter would be provided in early 2021. Analysis of the financial position for 2020/21 showed that the health board had maintained the £24m underlying deficit and the risk on unachieved savings was likely to be between £17m and £18m. The Board would be considering key service developments particularly within unscheduled care and whether the health board should continue as funding had not yet been identified. The forecast deficit for 2021/22 was circa £45m and this has had been placed on the risk register. The health board were currently developing a four phase approach to managing the financial position for the coming year which included; general housekeeping in terms of grip and control, service change and transformation, productivity, efficiency and benchmarking and maximising funding opportunities from a population health perspective.

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

#### Cancer Performance

The pandemic continues to affect all aspects of the cancer pathway with staffing resource being the main challenge. There was continued pressure in areas such upper and lower gastrointestinal and urology due to a high level of staff sickness. Radiotherapy and Chemotherapy staffing remained a challenge although performance was in line with all-Wales. The number of urgent suspected cancer (USC) referrals were near pre-COVID level; however, growth in demand was not as anticipated. November's position had shown positive progress in the stabilisation of the USC backlog and a decrease in long waiting patients. Positive progress had also been evident in Breast and Gynaecology with improving waiting times seen in October, November and December 2020. From December 2020, a major change to the management of suspected cancer patients as the single cancer pathway (SCP) will be introduced.

## Medically Fit for Discharge (MFFD) Update

As at the 23<sup>rd</sup> November, the cohort of patients within MFFD had reduced to 144 and had continued to reduce week on week with the current figure at 114. Challenges included the number of patients waiting for negative COVID-19 results to enable the transfer to next pathway

step and the outflow from hospitals was significantly impacted by the care home lockdown. There was also the issue the availability of domiciliary care in both local authority and private providers.

#### Financial Position

The cumulative overspend for month eight was £16.736m with movement of £1.911m in-month against the plan of £2.1m The reduction in the forecast to £24.4m was a result of a revision to the worst case TAVI cost and some other minor operational improvements. The movement in the forecast had given a high degree of confidence but on the caveat that this may change due to the challenges of the pandemic.

## **Delegated action by the committee:**

No delegated action was taken by the committee.

#### Main sources of information received:

- Performance report;
- Cancer performance report;
- Update on the Financial Plan and Finance report;
- Medically Fit for Discharge update report.
- Financial Monthly Monitoring Returns

# Highlights from sub-groups reporting into this committee:

No reports received from sub-groups.

### **Matters referred to other committees:**

No items referred to other committees.

Date of next meeting 26 January 2021