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Bwrdd Iechyd Prifysgol  
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Swansea Bay University  
Health Board



		Agenda Item	2.2 (i)
<b>Freedom of Information Status</b>		Open	
<b>Reporting Committee</b>	Performance and Finance Committee		
<b>Author</b>	Liz Stauber, Committee Services Manager		
<b>Chaired by</b>	Emma Woollett, Vice-Chair		
<b>Lead Executive Director (s)</b>	Lynne Hamilton, Director of Finance		
<b>Date of last meeting</b>	16 July 2019		
<b>Summary of key matters considered by the committee and any related decisions made.</b>			
<p>- <b>Performance (including targeted intervention areas)</b> Members noted that the performance report had been developed further to include primary and community care, mental health and learning disabilities and public health measures, and representatives of these services would be attending the committee in September 2019 to discuss the various sections. In addition, the dashboard now only showed monthly metrics against trajectories where available, or national targets where no trajectory exists. Quarterly performance updates now formed part of an appendix. Members were invited to submit feedback as to the new developments.</p> <p>As part of the <b>unscheduled care performance</b> discussion, it was noted that the four-hour performance remained flat at 74.98%. One-hour handover numbers increased in June 2019 but the total number of ambulance hours lost in handover was showing improvement in July 2019. 12 hour waits also showed an increase in June 2019.</p> <p>Action was being taken in relation to <b>cancer</b> and <b>stroke</b> performance and while both remained stable, it was not where it needed to be.</p> <p><b>Planned care</b> performance had been affected by the operational pressures. While the 26-week outpatient performance remained high, the 36-week stood at 2,318 cases against a profile of 2,125. There were no therapies cases waiting and plans were in place to manage the improvement needed for diagnostics.</p> <p><b>Healthcare acquired infections</b> were in-line with the performance trajectory and there were also improvements noted within the <b>workforce metrics</b>.</p> <p>- <b>Unscheduled Care</b> Escalation levels had decreased following a two-week 'Breaking the Cycle' programme and weekly meetings were now taking place with the service directors to provide grip and focus. The need for the transformation programme to become everyday business as unscheduled care was the responsibility for all staff. It was noted that compared with the first two weeks of June 2019, the first two weeks in July 2019 delivered the following improvement:</p> <ul style="list-style-type: none"> <li>• 4 hours performance by 2.5%;</li> <li>• 12 hour performance had a 37% reduction</li> </ul>			

- Two hour ambulance handover waits had a 7% reduction.

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

#### - Financial Position

The health board's month three position was a deficit of £1.5m with a cumulative position of £3.5m deficit. There were a number of contributing factors including operational pressures, pay and high-cost medications. A reduction in income had also been evident due to the operational pressures as this was affecting the amount of elective activity which could be undertaken and there had also been a slippage in savings delivery. Morriston Hospital was proving the biggest challenge. A delivery support team was to be established which would have a financial focus and units and executive directors had been asked to provide recovery plans. Members raised concern at the deterioration in the financial position, adding that greater clarity was needed around the reasons and actions being taken and people held to account for over expenditure or non-delivery of savings.

#### - Deep Dive: Continuing Healthcare

Members heard that continuing healthcare remained a significant financial challenge and work was needed to make the internal process more consistent as well as strengthen the relationships with local authorities. While some assurance could be taken from the report, the committee felt more granularity was needed to understand what expenditure increases reflected true underlying increases in demand and what reflected inefficiencies or non-optimal processes. The committee recognised that transferring care to the community would have an impact on demand for continuing healthcare, as would the demographic changes, but at present it was not clear what financial impact this might have. It was agreed that a further update would be received outlining the costs and benefits of the action plan and providing greater clarity on the financial implications.

#### - Savings Outcomes

While almost 100% of the savings schemes required had been identified, more was needed to provide 'headroom'. Concern was raised as to the non-delivery of some of the schemes, particularly the high value opportunities, therefore it was agreed that a tracker for the high-value opportunities would be included within the finance report going forward. In addition, benchmarking data for savings across Wales was also to be incorporated, to allow the committee to better understand our costs and efficiency by area and speciality.

#### - Delayed Follow-Ups

Delayed follow-ups remained a concern for the committee, with more clinical engagement needed in order for accountability to be sought for non-delivery, therefore it was agreed that a further update would be provided to the next meeting.

#### - Reserves and Commitments

Concerning the surge capacity spend, it was agreed that this would need to be placed on the health board risk register as a significant risk.

### Delegated action by the committee:

No delegated action was taken by the committee.

### Main sources of information received:

- Integrated performance report;
- Escalation reports for delayed follow-ups, unscheduled care and continuing healthcare;
- Monthly financial monitoring report;
- Sustainability and performance sections of the annual report;

- Continuing healthcare quarter four;
- Benefits assurance report.

**Highlights from sub-groups reporting into this committee:**

Reports were received from:

- Financial management group;
- Value and efficiency group;
- Investment and benefits group.

**Matters referred to other committees**

The issue of the high numbers of suicides within the Neath Port Talbot area was to be referred to the Quality and Safety Committee.

**Date of next meeting**

20 August 2019