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WALES

Bwrdd Iechyd Prifysgol  
Abertawe Bro Morgannwg  
University Health Board



		Agenda Item	3i.
<b>Freedom of Information Status</b>		Open	
<b>Reporting Committee</b>	Performance and Finance Committee		
<b>Author</b>	Emma Woollett, Vice-Chair		
<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>	18 July 2018		
<b>Summary of key matters considered by the committee and any related decisions made.</b>			
<p><b>Monthly Performance Report</b> – members were pleased to see some improvement in performance, particularly in Targetted Intervention (TI) areas. Although we are still off trajectory, Unscheduled Care has seen 3 months’ continued improvement and the escalation reports outline actions to improve further. A similar picture is seen for stroke. Internal profiles for planned care (both 26 weeks and 36 weeks) have now been met for every month in quarter 1, therapy waits are back to zero, and, although we are still off track for diagnostic waits, a plan is expected by the end of the month to address this. Performance against cancer targets continues to improve, and encouragingly, our backlogs are also reducing. Rates of healthcare acquired infections are reducing or stable and, though still above trajectory for <i>staph.aureus bacteraemia</i> and <i>e.coli bacteraemia</i> cases, we have met our internal target for the number of <i>clostridium difficile</i> cases.</p> <p>It was noted that Welsh Government have approved our request for Referral to Treatment (RTT) funding of £8.3m.</p> <p><b>Medical Agency Cap</b> – the committee received the regular monthly report and noted that the positive trend of the first two months in the quarter had not continued into month 3, which was of concern. The committee noted work underway to improve the position, in particular the opportunity to engage Kendall Bluck, who have undertaken successful work in England in partnership with Medacs, to work with us on reviewing our practice and rotas.</p> <p><b>Consultant Recruitment Panel</b> – the committee received this report, which has been discussed and approved by executives to support increased scrutiny of consultant appointments in areas of service expansion or change without delaying appointments unnecessarily which creates risk and expense.</p>			
<b>Key risks and issues/matters of concern of which the board needs to be made aware:</b>			
<p><b>Financial Position</b> – members heard that the current position (an overspend of £6.716 year to date) was still £454k more than the required run rate to achieve the £25m forecast deficit (based on 3/12 of the full year figure). Although there has been a marginal improvement</p>			

between periods two and three, the position remains very fragile. The key driver behind the overspend remains failure to deliver the necessary level of savings. Given that the profile of savings delivery is biased towards the later months of the year, this failure to deliver the necessary level of savings will result in greater financial shortfalls as the year progresses, so maintaining progress on identification of savings plans is imperative. In terms of delivery unit performance, both Princess of Wales and Singleton continue to give cause for concern.

**Recovery and Sustainability workstream progress** – members received escalation reports on two key workstreams, Workforce Redesign and Reducing Waste, Harm and Variation. In both cases, members were concerned by the lack of a coherent plan. Accepting that these workstreams are unlikely to deliver much financial benefit this financial year, the Finance Director confirmed that mitigating measures for savings have been put in place, but members agreed that successful delivery of both workstreams will be fundamental to the long term sustainability of both clinical outcomes and financial performance and that both should be fully owned and supported by the executive team. A plan of action for the Workforce Redesign workstream will be brought to the committee in September. Given the impending departure of the Medical Director and the Deputy Medical Director, it was agreed that the way forward for progressing Value Based Healthcare and Reducing Unwarranted Variation needed to be agreed by the new interim deputy medical directors and the Medical Director confirmed that he would ensure that he would provide a comprehensive handover to facilitate this.

**Delegated action by the committee:**

None.

**Main sources of information received:**

Monthly performance report  
 Monthly financial performance update  
 Monthly report on medical agency cap  
 Escalation reports on Workforce Redesign workstream and Reducing Waste Harm and Variation workstream

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

None received.

**Matters referred to other committees**

None identified.

**Date of next meeting**

22 August 2018