

Performance Governance Committee – Minute of Meeting
Thursday 3 November 2022
Via Microsoft Teams

1.0 Attendance

Present: Non-Executive Members

Bob Martin (Chair)
 Marie Burns
 Sheila Cowan
 Christie Fisher
 Ewing Hope

Board Advisor/Ex-Officio

Claire Burden	Chief Executive
Kirstin Dickson	Director of Transformation and Sustainability
Derek Lindsay	Director of Finance

In Attendance:	Lisa Marley	Head of Imaging
	Shirley Taylor	Committee Secretary (Minutes)

1.1 Apologies

Apologies were received from Marc Mazzucco, Linda Semple and Lee Lyons.

2. Declarations of interest

None received.

3. Minutes of the previous meeting – 1 September 2022

The minutes were approved as an accurate record.

4. Matters Arising

4.1 Action Log
 All actions were noted as completed.

4.2 Committee Workplan

The work plan is received at every meeting with any changes marked in red to allow changes to be easily identified. No comments were received.

4.3 Internal Audit Interim Update – Diagnostic Capacity

The Head of Imaging attended the meeting to provide an update on progress made against the actions of the internal audit review. The report was presented to the committee in May 2022 and agreement was made for an interim update due to the long timescale for completion of actions. To date eight of the eleven actions are now complete and have allowed for more streamlined systems to be put in place. Three actions remain outstanding which would require some financial investment in order to complete.

Discussion took place around the document management system action and it was noted that there will be a system wide approach to this action involving digital services.

Outcome: The committee received the update.

4.4 Emergency Scottish Budget

Discussion took place around the emergency Scottish budget and it was noted that a letter was received from the Scottish Government advising that due to the level of funding required for the pay settlement, budgets would require to be reduced elsewhere to compensate. This will have an ongoing impact to the board as recurring funding will be required for the increased pay offer from next year.

5. Capital Cases and Programmes

5.1 Trakcare Business Case

The Business Case was shared with the committee for information following the Corporate Management Team and outlines a high priority investment required to upgrade the Trakcare system from the current 2016 version to allow for higher functionality.

The upgrade will consist of a one off cost of around £1 million with a recurring cost of £462k which will be identified as a cost pressure as part of the future budget setting process.

Outcome: The committee received the paper.

5.2 Digital Services Reform

The Director of Finance presented the paper which builds on the requirements of the Trakcare Business Case as noted above and identifies the requirement for an upgraded and improved infrastructure to be able to host the new systems required. A great deal of work is taking place to understand what the platform is capable of however a paper will be presented to the NHS Board advising of the longer term requirement for an investment. Initial investment in 2022/23 of around £2.6 million to get the essential infrastructure into place has been approved by CMT.

Outcome: The committee received the paper.

6. Financial and Service Management

6.1 Financial Management Report – Month 6

The committee received the routine Financial Management Report for month 6 which saw an overspend of £15.5 million. This is higher than was anticipated for this point in the year. The projected overspend for the year was set at £26.4 million however we are currently on course for an overspend of just over £30 million. Covid funding of £16.5 million was received however this was less than required and has contributed to the position along with primary care prescribing costs being higher and not being able to close the unfunded beds due to winter pressures and delayed discharges.

A £7.3 million overspend can be seen in acute services for the first part of the year. This is due to unachieved efficiency savings, drugs cost overspend and a high level of agency spend which has remained at the same level as last year due to the continuation of the unfunded beds. An overspend of £3 million can be seen in supplies with £1.6 million of this being attributed to drug costs, partly due to the extra beds and also due to cancer drugs for the catch up of treatment.

Discussion took place regarding delayed discharges and it was noted that a two week programme is scheduled with colleagues from health and social care partnerships to ascertain why people are not moving through the system as they should and to develop alternative ways to reduce bed occupancy rates.

Offers have also been made to staff currently on part time contracts to increase to full time contracts on temporary basis in order to reduce the current spend on agency nursing.

Outcome: The committee noted the position.

6.2 Quarter 1 Financial Position – Letter from Richard McCallum

The Director of Finance advised that a letter was received from Richard McCallum on 12th September setting out the financial expectation for this year from the Scottish Government to deliver the £26.4 million deficit.

By way of response a letter was submitted to the Scottish Government advising of changes to delivery of a £26.4 million deficit with an action plan to support this focussing on the areas of elective care plans, sustainability and value collaborative, optimising capacity and financial improvement.

As part of the response, cognisance was given to the number of unfunded beds, increased length of stay due to delayed discharges, increased agency staffing costs as well as unachieved efficiency savings targets.

Outcome: The committee received the paper.

6.3 Performance Report

The Director for Transformation and Sustainability provided the routine performance report for August 2022 with some data for September 2022 including the new Scottish Government planned care targets as agreed at the last meeting.

The position is similar to that seen in the previous report however it was highlighted that the visibility of covid numbers were impacting across the system in terms of both acute and community numbers.

Large number of patients are on waiting lists for outpatients, inpatients and day cases. A reduction was seen in CAMHS performance in August 2022 with work ongoing within North Ayrshire to remedy this.

Unscheduled care performance is continuing to see challenges with regard to the four hour standard which is currently 68.7% for the month of September with a high number of 12 hour breaches. This is impacted by increased length of stay and lack of flow across the system as well as care at home and workforce challenges within the community.

Outcome: The committee received the report.

6.4 Priority Programme Plan for 2022/23

The Director of Transformation and Sustainability provided an update on the progress of the Priority Programme Plan. The programme is split into four programmes with a Director responsible for each one.

Rightsizing the bed footprint and Rightsizing the workforce have faced significant challenges due to the number of unfunded beds open which require agency staffing. Tackling both these programme simultaneously would have a significant impact across the system, however there has been limited progress to date.

Work is ongoing with regard to the electronic patient record and records management as part of the digital strategy, upgrade of Trakcare and wider digital investment.

The final programme is in relation to distributed working and estates rationalisation and is about having the right people in the right place at any given time and thinking about how we use buildings in the most effective way.

It was noted that although progress has been made in all programmes, there has been some slippage in terms of the progress made to date.

Outcome: The committee received the paper

6.5 Access Funding

The Director of Finance presented a paper on Access Funding which had previously been reported to the Performance Governance Committee in March 2022. The total funding for access in 2022/23 will be £7.8 million which was less than requested. A paper went to the Corporate Management Team to discuss how best to respond as most of the funding to be received has already been committed. A risk assessment and proposal were developed by the Corporate Management Team to focus on where funding is required. £433k has been identified for waiting

list initiatives for four specialties only; Neurology, Diabetes, Gastroenterology and Oral Maxillofacial. £455k of funding would be allocated to diagnostic capacity to continue seven day working for MRI and the CT pod at Ayrshire Central Hospital. £150k was also identified to tackle anaesthetics waiting lists due to surgeries being cancelled or postponed due to the lack of anaesthetic cover available.

In previous years most access funding was utilised to pay Consultants to undertake Waiting List Initiatives or to pay extra private sector capacity. Whilst it may be more cost effective to employ more staff this poses a risk with regard to funding permanent posts from non-recurring funding.

Funding all of the above would affect the financial outturn by around £1 million which is the extent the spend will exceed the allocation.

Outcome: The committee receive the paper.

6.6 Taxi Spend

The Director of Finance gave an update on the taxi spend so far for the first half of 2022 which is £391,382 and results in an overspend of £211k to date. A tender process for the taxi service has just concluded and has shown an increase of around 25% due to increased fuel costs which will result in a cost pressure.

Work is ongoing to see how best to reduce these costs such as utilising the SLA with the voluntary sector organisation St Johns to transport renal patients or using motorbikes to transport samples to between Ayr and Crosshouse out of hours.

Outcome: The paper was received by the committee.

6.7 HSC Winter Preparedness

The Director of Finance advised that a joint letter was received with regard to supporting the health and social care system as we head into winter. Various care at home measures have been identified for additional funding to support current system pressures such as enhancing care at home and recruiting extra care staff to support this. It is unclear as to whether the investment so far has had any impact.

It was noted that NHS Ayrshire and Arran have been mentioned within the letter highlighting an area of good practice. This refers to the employment of medical students at lower bandings to support medical staffing.

Outcome: The committee received the letter.

7. Risk Register

7.1 Strategic Risk Register

The Director of Finance presented the risk register which is a subset of the total strategic risk register and shows only those risks that are relevant to the Performance Governance Committee. There are six risks in total with two of those risks being financial.

The Director of Transformation and Sustainability received an action at the last meeting to discuss with the Assistant Director of Health, Safety and Occupational Health the new waiting times targets set out by the Scottish Government and whether these should be noted on the strategic risk register. It was found that a risk already exists with regard to waiting times targets, specifically in relation to Treatment Time Guarantee (TTG) and the legal element of the delivery of this. It was agreed that the existing risk would be updated to include the additional target set by the Scottish Government. An update on this will be provided at the next meeting.

ACTION: Kirstin Dickson

Outcome: The committee received the risk register.

8. Key issues to report to the NHS Board

The Chair requested that the items to be reported to the Board are as follows:

- Trakcare Business Case
- Priority Programme Plan
- Financial Management Report
- Access Funding

Outcome: A summary of the papers received would be prepared for presentation to the Board.

9. Risk issues to report to the Risk and Resilience Scrutiny and Assurance Group

Nothing raised.

10. Any other competent business

10.1 Meeting dates for 2023/24

The committee agreed the future meeting dates proposed for 2023/24.

Outcome: The committee noted the dates.

10. Date of next meeting

Thursday 19th January at 9.30am via Microsoft Teams

SignatureDate