

Minutes of a Meeting of the AWP NHS Trust Finance and Planning Committee

Held on 22 May 2015 at 9.30 a.m. in Seminar Room 4 at Jenner House, Langley Park, Chippenham, Wiltshire, SN15 1GG

These Minutes are presented for **Approval**

Members Present

Lee O'Bryan (LOB) – Non-Executive Director, Chair
Sue Hall (SH) – Director of Resources
Peaches Golding (PG) – Non-Executive Director
Kristin Dominy (KD) – Executive Director of Operations

Staff In Attendance

Fiona Bell (FB) – Head of Project Management
Gary Bryant (GB) – Deputy Director of Finance
Pippa Ross-Smith (PRS) – Head of Strategic Finance
Alex Lauder-Bliss (ALB) – Governance and Risk Coordinator
Paul Townsend (PT) – Managing Director, Secure
Peter Wilson (PW) – Head of Business Development
James Eldred (JE) – Clinical Director, Bristol
[Not present throughout]

FP/15/016 – Apologies

1. Apologies were received and accepted from Barry Dennington.

FP/15/017 – Declaration of Members' Interests

1. In accordance with AWP Standing Orders (s8.1) members present were asked to declare any conflicts of interest with items on the Committee meeting agenda.
2. **None were declared.**

FP/15/018 – Minutes/Summary of the meetings on 20 March 2015 and 24 April 2015

Minutes of the meeting of 20th March 2015:

1. The minutes of the meeting were approved and taken as accurate, subject to the amendments outlined below:
2. KD had been in attendance by telephone.

Minutes of the meeting of 24 April 2015:

3. The minutes of the meeting were approved and taken as accurate, subject to the amendments outlined below:
4. PT's job title was Managing Director.

FP/15/019 – Matters Arising from the Previous Meeting

1. Bristol Mental Health – SH explained she was yet to receive a response from the CCG regarding a second review of the tender process. **Ongoing.**
2. OOA Placements – KD explained the escalation procedure had been utilised in the previous week. JE and KD noted the process had worked well. **Completed.**

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3. CQC Works – SH noted the CQC programme had been circulated. **Completed.**
4. Annual Operating Plan Risks – SH confirmed the annual operating plan had been submitted. **Completed.**
5. Daisy Business Case – SH believed this will be presented at the next F&P meeting. **Completed.**
6. Reference Cost Deep Dive – This appeared on the agenda. **Ongoing.**
7. Finance Report M12 OOA Costs – KD confirmed the work had not been completed. The cause of OOA numbers increasing was understood, however no analysis had been conducted of the cost in real terms. SH suggested this could be included in the Acute Care Pathway work. **Completed.**
8. PT joined the meeting.
9. Finance Report M12 Rostering – KD noted teams that used the Allocate system would be revisited to confirm whether they required further training on the system. BD had asked for a meeting to discuss the agencies the Trust used and that had been scheduled. **Completed.**
10. Finance Report M12 – **Completed.**
11. CIPs M1 – **Ongoing.**
12. CIP QIAs – An update was included in the QIA report. **Completed.**
13. Quality and Performance Report M12 – KD had spoken with Andrew Dean as she believed any proposal regarding the model would need to be clinically led. She explained that FP/15/027 would not be required as a result. Any IAPT proposal would be passed to Q&S initially. **Completed.**
14. Safer Staffing – KD explained that Andrew Dean would provide an analysis of the required changes to the Board. **Completed.**
15. LOB noted that TDA had sat in on a previous F&P meeting, and their feedback had been broadly positive. Some issues raised were that papers presented could have been improved and that the meeting could have been shorter.

FP/15/020 – Progress on Annual Objectives

1. SH stated this would be a standing item for F&P. She explained it would focus on the 'Use of Resources' objective, to reduce overhead and reference costs. The Use of Resources was an objective that was primarily around a project by Pippa Ross-Smith, who was leading this work.
2. SH confirmed that more detail would be provided next month.

FP/15/021 – Finance Report

1. GB stated that the plan for month one had been achieved and the Trust was showing a planned deficit for the Financial month. Performance had been better than planned by £18,000. The only amber KPI rating was for capital spend; this was largely due to IT procurement slippage.
2. LOB clarified that three matters concerned him: staffing, the back-ended CIP programme and the amount of risk surrounding Bristol. He said he wished more detail on staffing before Q1 concluded. PG agreed those issues were of concern, but believed on staffing there was a need to wait for Andrew Dean to complete his work. She mentioned the good quality of Greyfriars' environment, and suggested it was a model for Daisy and Hillview. LOB suggested a future agenda slot for discussing that matter, and he would raise it at the Board.
3. On staffing SH noted that recruitment remained an issue. PT said that there had been an increase of safeguarding issues in Secure that required staff the bank could not provide. There were

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vacancies filled by agency staff and an increase in demand, particularly for Band 5 nurses.

4. SH said that the Trust remained within its budget on staffing, however an additional agency premium had been included for Q1. KD stated that one problem was bank staff leaving to join agencies. LOB clarified the underlying risk upon the agency premium ending was £100,000. JE stated that there were issues with organisational development team away days. SH clarified that the team programme worked generally, but would be adjusted for teams it failed to properly cater for.
5. GB stated that the major overspends on non-pay were OOA expenditure and a one-off contract termination payment for the previous rostering system. He explained that the non-current assets variance on the balance sheet was primarily due to not delivering the capital programme to plan.
6. JE presented a paper on Bristol 'Go Live'. He explained that the model involved significant voluntary community sector (VCS) recruitment. Band 4 posts remained challenging in terms of recruitment and retention. JE explained that there was a cost pressure of around £100,000 for staffing. KD said that there was a need to know the net position against the vacancies as that would need to be mitigated rather than the cost.
7. The experience with North Bristol had resulted in a delay to moving the South Bristol team. The long-term plan for the Inner City and East was to move to the Wellspring Healthy Living Centre; currently, the team was situated at a small space in Brookland Hall which was unsustainable.
8. On finances, SH explained that savings would be required to close the gap. GB clarified that work was ongoing. SH believed that there would be more detail by the end of July. **ACTION: GB** JE said that cutting back on clinical posts would not be bearable for staff.
9. JE believed that the estates changes needed to occur urgently. SH confirmed that Bristol should detail what accommodation they required and the Trust would endeavour to find something suitable. JE was concerned that he was instead told which locations were available rather than being asked what he required. PRS noted that the first meeting with the Estates Strategy Board had considered the issue. LOB suggested that JE discuss what estates were required and return to the next F&P meeting with the costs. **ACTION: JE**

FP/15/022 – Future Focused Finance Report and QIAs

1. On CIPs, FB said that the planned £247,000 had been delivered. On QIAs, schemes for May and June had been completed in month. The Wiltshire and BaNES new build programmes were on plan. The Acute Care Pathway programme had commenced, with the programme manager in place. One concern had been reported around a national CQUIN; an action plan had been agreed and signed off.
2. FB believed that the area of risk was putting 3% of the CIP into Trust-wide schemes. However, she stated it was the correct approach. SH believed that the message had not been communicated to the localities that the Trust was placing less pressure on them regarding their day-to-day business. JE suggested, and PT agreed, that the fiscal environment had been so austere that a smaller cut was not perceived positively.
3. FB summarised the 10 Trust-wide CIP schemes:
4. Workforce Development – There would be income generated from the apprenticeship programme.
5. Medical Standardisation – The spend on medical agency would be reduced.
6. Overhead Reduction – Savings would be identified regarding the back office and any possible PFI

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and estates rationalisation.

7. AHP Standardisation – There was a target of a 1.5% Trust-wide reduction. FB noted there was potential risk on this matter which depended on Andrew Dean's work on the Establishment Review.
8. Salary Sacrifice – The savings had not yet been identified.
9. Systems Optimisation – The functions of core systems would be mapped out to inform decisions about peripheral systems.
10. Estates Master Plan – This was linked to disposals.
11. IM&T Programme – Savings would be identified regarding PC licensing, telephone and other systems.
12. Procurement – This largely concerned contract and SLA renewals.
13. Pharmacy – A separate programme group would report to the MOG and FFPB. About half of the programme had been from reductions in the cost of drugs.
14. FB said that none of the QIAs had failed due to the quality of the schemes. Rather, several QIA iterations had been required as they had been composed assuming the reader understood the schemes. She confirmed that many of the QIAs had been passed.

FP/15/023 – Quality and Performance Report

1. KD noted that delayed transfers of care in the monitor compliance dashboard had become green at 7.4%. There were significant challenges in Bristol. The indication in the report that 166 service users had not received an annual CPA review did not indicate that they had not been seen. FB suggested that detail be provided on how recently the quoted 166 service users had been seen.
2. KD stated that an investigation was underway regarding process issues on reporting and recording of gatekeeping at Wiltshire. On memory services, North Somerset and Swindon still presented challenges; work was underway to confirm with the CCGs what the trajectory for improvement would be.
3. There was a six month secondment for an OOA bed manager who would support localities in bringing OOA patients back into the Trust as soon as possible. There was a project plan for the Acute Care Pathway which would be presented to Board.
4. PW joined the meeting.

FP/15/024 – TDA Oversight Return

1. SH clarified that there were changes to the document. G6 would include the internal audit annual report for 2014/2015 and the AGS. Under P1 the Data Quality Internal report was included. On 8a, the AGS was submitted as evidence.
2. The Committee resolved to **endorse** the changes.

FP/15/025 – Work Plan 2015/16

1. LOB stated the plan would change over the course of the year. SH added that the Standing Financial Instructions were missing. She hoped that these would be brought to the Committee in August.
2. The Committee resolved to **endorse** the plan.

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FP/15/026 – Annual Operating Plan

1. SH stated that the plan had been submitted but there was no feedback from the TDA. The item was **ongoing**.

FP/15/028 – Hillview Project Update

1. PRS explained that the Trust was looking to re-provide the elder peoples' beds in BaNES. The preferred option was a 45 bedded unit, a s.136 suite and observation suite. The capital cost would be funded via an NHS loan.
2. SH explained that the costs detailed were provisional and conservative. She confirmed that the detailed business case would be circulated. **ACTION: ALB**
3. The Committee **agreed** to allow the OBC to be issued to the TDA.

FP/15/029 – Commercial Tendering Report (Verbal Update)

1. PW stated that Business Development were developing an enterprise strategy. Work would take place in June with the LDUs to ensure their business aspirations were properly considered. The Trust was currently involved in some tenders.

FP/15/030 – Any Other Business

1. No other business was declared.
2. PG gave the meeting a 4. She liked the papers.
3. SH gave a 4. She was content with the length of the meeting.
4. FB gave a 3.5. She said that F&P was a place to connect various issues together, and therefore did not believe the meetings should be shorter.
5. PRS gave a 4. She believed that the Committee required time to discuss what it wished to.
6. PT had found the meeting very helpful and said that it was important to understanding the wider position of the Trust. He gave the meeting a 4.
7. KD said that the meeting had been useful, though she felt some operational issues had been discussed on estates. She gave the meeting a 4.
8. GB believed that the reports were of a good quality although he still had difficulties receiving all of them. He gave the meeting a 3.
9. ALB gave the meeting a 3. He said that a short meeting did not mean issues were being dealt with efficiently.
10. LOB gave the meeting a 4. He felt that the reports were much improved from the previous year.