

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

Held on Friday 21st August at 9.30am, in Seminar Room 4, Jenner House

These Minutes are presented for **Approval**

Members Present

Lee O'Bryan (LOB), Non-Executive Director, Chair	Mathew Page (MP), Acting Director of Operations
Sue Hall (SH), Director of Resources	Peaches Golding (PG), Non-Executive Director

Staff In Attendance

Graham Hotchem (GH), Interim Deputy Director of Finance	Pippa Ross-Smith (PRS), Head of Strategic Finance
Peter Wilson (PW), Head of Business Development	Toby Rickard (TR), Head of Business Intelligence
Iain Tulley (IT), Chief Executive Officer	Paula May (PM), Managing Director, Swindon
Liz Richards (LR), Managing Director, BaNES	Suzanne Howell (SHo), Managing Director, North Somerset
Fee Bell (FB), Head of the Project Management Office	Anthony Gallagher (TG), Chair

FP/15/063 Welcome and Apologies

1. LOB welcomed the participants to the meeting and advised that the purpose of the Financial and Planning Committee was to focus on delivery of financial results. He advised that the Committee had responsibility for delivering a forward plan for the Trust and also had a role in ensuring there was a realistic and effective business development plan in place.

FP/15/064 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/15/065 Minutes/Summary of the Meeting on 21st August 2015

1. The minutes of the meeting dated 24th July 2015 were unavailable. Discussion on this item was **deferred**.

FP/15/066 Matters Arising from the Previous Meeting

1. On action one, regarding Bristol Mental Health, SH advised that there had still been no response from CCG in relation to the Gateway Review. She reported an internal consideration of lessons learned from the tender would be conducted. This action remained **ongoing**.
2. On action four, regarding Budget Safer Staffing, MP reported that AD's paper had been brought to the most recent Board meeting. He reported that the MDs had asked when they would have vision on the Safer Staffing Paper. The Finance and Planning Committee recommended that the Safer Staffing paper be shared with the MDs. This action remained **ongoing**. **ACTION MP**.
3. On action five, regarding the PMO Internal Audit Review, SH undertook to report back on the progress of the Internal Audit. This action remained **ongoing**. **ACTION SH**.

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4. On action six, regarding the Finance Report M2 (AWP staff moving to agency), MP reported that monitoring began on 1 June. He reported that there had been four occasions where people who have worked for the bank had tried to re-work for the Trust on agency. It was accepted that this was a relatively small issue in the scheme of things. This item was marked **complete**.
5. On action seven, regarding Quality and Performance Report M2 (DTCO benchmarking), MP advised that the paper had not included the Nottingham DTCO data, but reported that TR had now compiled the information. He reported that during the last four quarters the rate of DTCO had been 5.1%, 5.3%, 4.5% and was currently sitting at 3.3%. The national average was noted as being 2.9%. This item was marked **complete**.
6. On action eight, regarding the Recruitment and Retention Strategy Working Group, BD reported that the Group consisting of BD, JT, AD, JH and AW had met that week. He advised that a paper would be presented during this meeting. This item was marked **complete**.
7. On action nine, regarding the Finance Report M3, MP advised he would provide an update on agency and rostering during the Quality and Performance Report. This item was marked **complete**.
8. On action ten, regarding the Finance Report M3, SH advised that the breakdown of risks and opportunities had been included in the Finance Paper. This item was marked **complete**.
9. On action eleven, regarding Bristol Go Live, GB advised that the wording had been updated on the report's cover sheet as requested. This item was marked **complete**.
10. On action twelve, regarding Bristol Go Live, it was noted that the income target had been clarified. This item was marked as **complete**.
11. On action thirteen, regarding Bristol Go Live, MP reported that there had been no discussions as yet between Swindon and Bristol. This action remained **ongoing**.
12. On action fourteen, regarding the Overhead Reduction Workplan, it was suggested that this action should be moved to TR. This action remains **ongoing**. **ACTION TR**.
13. On action fifteen, regarding the Future Focus Programme Board, SH reported that a recommendation had been made in the paper that was being presented at this meeting. This action was marked as **complete**.
14. On action sixteen, regarding the Quality and Performance Report M3, this item was **removed** from the action list.
15. On action seventeen, regarding the Quality and Performance Report M3, MP reported that the Trust runs the only Female PICU within their geography and once this is full people need to go out of area. The furthest person placed was in Bradford, which was noted to be 225 miles away. The out of trust placement use rose during the first two weeks of August, but was now back down to 21. LH, the Out of Trust Placement Manager had been working to get the patients back into their geography. This action was marked as **complete**.
16. On action eighteen, regarding the Quality and Performance Report M3, SH reported that two meetings had been held with CCG (locality/executive) and a further meeting had been arranged to combine locality, management and executive. This action was marked as **complete**.
17. On action nineteen, regarding the TDA Minutes, MP confirmed that he had followed up on the TDA actions raised. This action was marked as **complete**.
18. On Horizontal Reporting, it was noted that the review of the ESEC transition was on the meeting agenda and the Quality Academy/NQD Review was scheduled for September.

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FP/15/067 Finance Report M4

1. SH advised that there would be a financial gap of £7.4 million for the year end, made up of slippage on CIP Programme, Bristol stranded overhead costs and the current cost pressure at Secure and Bristol. SH reported that the Executive Team and the Directors Team had discussed the plan to address the financial challenges identified in her report and were agreed that they would investigate/pursue the opportunities indicated. LOB asked about the sensitivity of the £7.4 million figure. SH advised that she was confident that the gap would not get any worse. LOB asked SH to compile a Risk and Opportunities analysis on the £7.4 million - **ACTION SH**.
2. SH circulated her draft response to the TDA for comment. She advised that the majority of other FTs she had spoken to had indicated that they would not change their financial plan and had pushed back on the revised targets. SH recommended that AWP also push back on the revised target. Feedback to the response was as follows: PG suggested they advise the TDA that reducing the spend further would jeopardise the healthcare economy. BD suggested they consider what differentiates AWP from other trusts noting that this letter should indicate why the target is unreasonable for this AWP. MP suggested they also raise the fact that the Trust was currently undertaking the Quality and CQC transformation programme which would also impact on the Trust's ability to meet additional targets. LOB suggested that the impact on services be clearly stated.
3. Regarding stranded costs, it was noted that the Trust had been left with Estate costs where the plan had been to remove buildings but this had not occurred. SH explained that the objective of reducing overheads of 3.5% should still be achieved in the longer term advising that the additional Estates reconfiguration in Bristol would happen in the following year.
4. In relation to staffing, it was reported that temporary staffing shifts had continued to increase. There had been no increase in permanent or bank staff. SH reported that the Trust was now actively recruiting bank staff (nursing, HCA and qualified).
5. SH reported that one of the actions from the working group on agency costs had been to consider paying bank staff at a higher rate within their band as this would still be net less than paying an agency but might attract more bank staff. She advised that there were multiple strategies in place to deal with this issue, and noted that while they had noticed reduction in agency costs, it was difficult to pinpoint which strategy had led to that change. PRS advised that the working group was aiming to put metrics in place to identify the effects of the programmes.
6. Regarding Capital Plans and Disposals, SH reported that a utilisation review was underway to identify whether there were additional buildings that could be disposed of. The Committee agreed that it would be helpful to show the progress on projects rather than reporting on cash.
7. The Committee **approved** the in-month budget changes highlighted in the report, and resolved to **note** the report.

FP/15/068 Wiltshire Update

1. It was reported that there were currently around 85 vacancies in Wiltshire, 45 of which were In-Patient, with those remaining being spread across medical consultants and other disciplines. Vacancies were being tracked monthly with the CCG and recruitment and retention figures were being recorded. It was noted that a joint piece of work was being carried out with Wiltshire Workforce Plan (on acute and community services). Links with local and national universities and teaching hospitals had been significantly improved. Large gaps at the Band 7 level were reported as being a key issue. It was noted that the locality had been successful in attracting staff from London. These recruits had also encouraged colleagues to make the move.

2. A large overspend on agency and bank staff was reported with it being noted that consultant vacancies, long term sickness and a disciplinary action had put pressure on the budget. It was expected that the position would improve with bank staff being paid weekly. Some gains had been made in recruiting unqualified staff at recent local job fairs. Some ongoing issues were reported with Rosterpro (Amblescroft and Beechlydene affected). All avenues were being explored to ensure agency staff were being employed as cost effectively as possible without compromising quality. The challenges were reported to be low morale and stressed existing staff.
3. It was reported that the locality had moved to the all-age CMHT structure. The alignment of community services to the CCG Sector Areas had been completed. The CD and Quality Director roles had been permanently filled. Wiltshire IAPT service was now an individual entity and the locality was reviewing the service with the CCG to move it forward. There had been a resolution of Charter House and its dementia strategy. An agreement had been made to fund Care Home Liaison, with circa £700k, to start in October. Parity of Esteem funding had been agreed, and was being used to fund the ER service. Agreement had been reached to proceed with the S136 business case. Campus opportunities were being explored with Wiltshire Council. The Wiltshire Alliance was working on the General Community Services tender with Medvivo. Agreement had been reached about reintegration with Wiltshire Council. The team was reviewing service pathways with CCG and Acute Liaison IAPT, early intervention, dementia and personality disorder.
4. In summarising the challenges, it was noted that Barbara Smith was reviewing the Block Contract its entirety. There had been 30 out-of-areas and DTOCs on the wards and beds had been reduced because of staffing. Beechlydene was reported to be at full capacity. It was anticipated that more qualified staff would be employed at Ashdown enabling them to open more beds by the end of September. The Committee discussed the out-of-area designation/definition with it being acknowledged that there were "good" and "bad" out-of-area cases.
5. In noting the upcoming opportunities, it was reported that the Community Services Tender underway; the Children's Services Tender was coming up next year; the locality was bidding for more funding for EI Services; and rationalisation of the estate was underway.
6. It was noted that training initiatives could be developed with colleges to jointly develop plans. DC undertook to liaise with BD who had contacts with Nationwide and other local colleges. **ACTION DC/BD.**
7. MP advised that there had been some miscommunications in relation to the Pharmacy CIP and resolutions were being sought. He noted that this should not be a cost pressure.

FP/15/069 Hillview Outline Business Case

1. PRS advised she had planned to bring the Outline Business Case to this meeting to seek approval. However, a formal approval of the SOC was yet to be received from the TDA and the OBC could not be approved without this. It was anticipated that the OBC would come back to the Finance and Planning Committee and would then be directed to the Board for approval.
2. PRS advised that consideration of the implications of transfers between Trusts had re-opened a previous option on the RUH site, which related to the old manor house and the land around it. It was believed that more could be done with the available land than had originally been thought and decant would not be necessary. It was reported that the P21 contractor had been appointed and would review Option B.
3. Regarding the timeline, PRS advised that it was unlikely that a loan could be drawn down until 2017.

FP/15/070 Future Focus Programme Board

1. FB reported that the Trust Programme was rated green for YTD delivery, however three programmes due for delivery in Months 5 and 7 were now classed as red. These programmes were now anticipating 32% (£3 million) under-deliveries at year end. The risk rating for the programme would therefore become red in future months.
2. FB confirmed that the concerns raised at the last Finance and Planning Meeting around Medical Standardisation, the Estates Masterplan and the Overhead Reduction Plan had materialised.
3. FB advised that the premise of the Medical Standardisation had been around standardisation of medics. Once the review had been conducted, no significant disparity had been identified. This led the scheme to focus on reduction of agency (non recurrent requirement), but the team concluded there was little to be gained from this project. HR was reported to be forecasting that only £5k of the original £450k savings target could be reached.
4. FB advised that the Estates Master Plan was closely related to the Capital Disposals Plan. She advised that the programme delay and likely changes to the plans had led to uncertainty about the level of recovery that could be expected.
5. FB advised that the Overhead Reduction Plan was due to begin delivering savings within the month. She noted that more certainty was required about the potential for double counting between the CIPS schemes, the cost reduction plans and other schemes being rolled out across the Trust.
6. FB outlined the Phase 1 work that had been done on Acute Care Pathway and identified the key achievements of reducing out-of-Trust placements and introducing 17 additional beds from the private sector. A Phase 2 update was also provided with FB noting that this would run through to the end of October. The aim of Phase 2 was to agree the final PID for Phase 3 taking into consideration the circumstances of the Trust now. FB suggested the key themes would be bed management and LDUs.
7. FB summarised that looking ahead, the key focuses would be to ensure plans were more fully developed to bridge the gap; to ensure the recovery team was put together and provided with appropriate data; to work on the recovery of the CIP programme; and to ensure Trust wide schemes had been identified to service providers so that they would know what would be coming out of their budgets.

FP/15/071 Quality and Performance Report

1. MP spoke to the key issues outlined in the Executive Summary of his report. He noted that the July dashboard had improved significantly, noting that only the Gatekeeping of admissions by crisis teams was showing red; and even so, significant process had been made in this regard. He congratulated the LDUs on the progress made on gatekeeping.
2. MP advised that concerns raised by the Executive Team about the Bristol Central Recovery Team and Unallocated Cases had been investigated and recovery plans had been developed. Initiatives had included rapid implementation of a caseload management tool, the setting up of depot clinics, work completed around demand management and proposal of temporary staffing solutions for administration and clinical staff. He confirmed that as a result of the plans, the unallocated cases in Bristol Central Recovery had dropped from 230 to 107 by 18 August 2015 and he noted that he was confident further reductions would be realised.
3. MP reported on the Improvement Plan being led by Mark Bunker noting that the CPA review compliance rate had risen from 83% in July (in the North Recovery Team) to 90.8%. It was

reported that staff supervision rates, appraisals and crisis and contingency plans had risen throughout all teams.

4. The Committee discussed the sustainability of the results that had been reported. MP advised that the sustainability would be achieved by the teams continuing to follow the processes that had been set in place.
5. The Committee **noted** the progress that had been made on the Bristol performance.

FP/15/072 Progress on Annual Objectives

1. PRS advised that during the last month she had focussed on the re-working of the PWC data.
2. PRS reported that when PWC and completed their report, staff cost had accounted for 75% of the Trust's operating income. This had moved to 71% for 2014-15. She undertook to examine the differences year on year.
3. PRS reported that she had examined the staff numbers and advised that permanent numbers had increased. She undertook to look at the average temporary staffing rate to compare like with like across the cost base.
4. PRS reported that administration staffing had remained at 20% of the workforce; hotel support was 4%, medical sat at 7% and nursing staff and other clinical were at 69%. The proportions had not changed from the previous year although the staff numbers had changed. She undertook to conduct an analysis by grade and make a comparison between LDUs.
5. PRS advised that she was updating the corporate functions analysis conducted by PWC both using current costs and the latest national health benchmarking corporate functions data. PRS undertook to update the Committee on progress at the September meeting.

FP/15/073 Agency Reduction and Recruitment

1. SH sought some feedback on the information contained within the report given that this was the first time she had reported to the Finance and Planning Committee on this subject.
2. SH advised that action had been taken to reduce the gap between the vacancy notification date and the time it took to fill the vacancy. Processes had been streamlined to make the overall timeframe shorter and pre-emptive action was being taken on anticipated vacancies (i.e. beginning the recruitment process early).
3. SH advised that more apprentices were being engaged in the EFN area and bank is used frequently.
4. The Committee was introduced the activities of the Agency Reduction Programme Board and the Recruitment Strategy Group by MP and BD. BD spoke about the activities of the Recruitment Strategy Group. He advised the Group had looked at the tiering within the frameworks and reported that tiering had not been done for nursing. They had also discussed engaging an agency to manage AWP's use of agencies, noting that other organisations had achieved savings through economies of scale. The Committee supported further investigation in this area.
5. The Committee resolved to **note** this report.

FP/15/074 Commercial and Tendering Report

1. The Committee resolved to **note** this report.

FP/15/075 Standing Financial Instructions

1. Discussion on this item was **deferred**.

FP/15/076 IMT Capital Programme Review

1. AHE reported that the IM&T strategy had been approved by the Board in September 2013. This was a three year programme and was due to be replaced the following year. Key components of the vision were identified as mobility, interoperability and workflow, as well as continuing to provide IM&T services. AHE outlined the strategic objectives as set out in her report. She also outlined the scale of the IM&T services that were being provided/supported.
2. AHE talked about server replacement noting that a few large servers had replaced many small servers and replacing/updating was now a much larger job. She noted that they had moved to a model of replacing desktops with laptops. RiO and OurSpace were to be replaced. Technology developments were focussed in three different areas these being, Wi-Fi & telephone system, compliance in network management and a Mobile Development Management System.
3. AHE advised that deployment of the programme had been challenging in Bristol citing the example of trying to encourage staff to use docking stations and identify this as being a difficult shift for people to make. In Wiltshire the logistics of getting the hardware to work had been challenging with staff dealing with 20 minute logon times and long processing times.
4. LOB noted that it seemed as though AWP was deploying a strategy that was not moving fast enough nor was the anticipated level functionality being achieved. It was acknowledged that there were difficulties related to the wide geographic area that was being covered and a five year old Wide Area Network system that needed upgrading. It was suggested that in terms of deployment AWP should be looking at business processes and consider adopting functionality that meets those requirements. It was noted that Rio was releasing an offline capability which would provide the ability to use store and forward. AHE summarised that they programme was running behind but the team was busy and working hard.
5. SH suggested that linking the culture change and delivery had not been well managed which may have led to low tolerance of IT issues or updates among staff. It was noted that this should be addressed through the Agile Working Group via the Future Focus Programme Board.
6. It was noted that the number of printers within the Trust should be reviewed and consideration given to reducing these.
7. The Committee agreed to review the work of the IM&T Capital Programme again within the next 6 months. **ACTION LOB.**

FP/15/077 TDA Oversight Return

1. It was noted that no TDA Oversight Return had been provided with the meeting papers.
2. SH advised that the performance had not changed from the previous month and therefore proposed that the Finance and Planning Committee recommend the Board be provided with a Chair's action to accept that the TDA Oversight Return be considered to be the same as that for July.
3. The Finance and Planning Committee agreed to **recommend** to the Board that the TDA Oversight Return be considered to be the same as that of July.

FP/15/078 TDA Meeting Minutes

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1. There were no TDA Meeting Minutes to review.

FP/15/079 Any Other Business

1. It was reported that the ESEC Committee would cease meeting. A transition plan was being compiled to address changes in the Terms of Reference of other Committees which would take on ESEC's work going forward. SH confirmed that the Strategic Workforce Group would be chaired by AD with SH and MP in attendance. AD would formally report to the Quality and Standards Committee from the Strategic Workforce Group. SH would report any issues from the Strategic Workforce Group to the Finance and Planning Committee. This would be discussed in more detail at a future meeting.
2. The Board members present reviewed the meeting.

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