

Introduction

The report below provides the Board of Directors with an overview of any changes from last month in the confidence of the delivery of the cost improvement programme (CIPs) and any effects on patient safety and quality of care as a consequence of the implementation of the CIPs.

Recommendations

The Trust Board of Directors is asked to receive and note.

Position Statement

The table below indicates the summary position by group for changes in quality and financial delivery of the CIP programme from last month.

Group	Changes in delivery from previous month	Changes in risk on quality & safety delivery (have any schemes changed their risk scoring)
Medical	Scheme relating to closure of 10 beds across medical & elderly wards has been removed; marginal improvement in delivery of procurements savings on drug expenditure.	The delivery of reduction of 10 beds has reduced to zero due to increase in demand for acute medical care.
Diagnostics	no changes	No changes
Surgery	Vacancy restructure has been moved back 1 month to agree value, anaesthetic medical staff cip has been moved back 2 months whilst Zero based budget exercise takes place	The confidence in delivery of schemes has not changed but value has slightly.
Women's & Children's Services	Increase in births has been taken out after a review of the forecast for the remainder of the year.	The number of births now projected at 2011/12 level.
Community	Additional rental income from community services premises has underachieved year to date.	No change in quality/safety scores.
Corporate	Monthly Review of various CIP Schemes which have not been achieved in month, so YTD reduced by 1/12; Added YTD Non-Recurrent Pay Underspends to CIP Tracker	No changes to delivery or quality/safety.
Facilities	no changes	No changes

Medical Group

The Trust has experienced unprecedented demand on acute medical services since May 2012. The acute admissions have increased by 8 percent and the age and complexity of the conditions of the patients have also increased. The patients are often requiring complex assessments and packages of care from external agencies which can take some time to be put into place. A bed modelling exercise demonstrated that at least 15 beds would be required to cope with the extra demand. As a result of this, the Medical group felt from a safety and quality point of view, that the CIP relating to 10 bed reduction would be removed from the CIP schemes. The nursing staff establishment would be increased to staff these beds. The level of overtrade due to emergency work (at 30 percent tariff) is in part mitigating the impact of the lost savings but this will be recognised only when the contract outturn levels are agreed. Further schemes are on-going within the group to close the gap including plans to reduce medical agency expenditure.

Diagnostic Group

The Diagnostics group's risks of delivery and quality/safety have not changed this month although further opportunities for new income associated with Direct Access Pathology work are being developed. The group has received a credit note of £21,000 from Siemens for the downtime of the new MRI scanner in the radiography department but this is being used to offset other financial pressures. The downtime had not affected waiting times for patients.

Surgical Group

A review of the delivery of the anaesthetic staffing scheme is being undertaken to determine if its achievable. Because of the growth in surgical activity, the demand for anaesthetic staffing may have increased since this scheme had been put forward and this demand needs to be factored into the establishment review.

The amount of elective activity being undertaken is higher than last year and hence any overtrade will be compensating for shortfall in CIPs. Because of transforming patient pathways through enhanced recovery and day case procedures, no additional beds have been required to undertake this increase in activity. The theatres and endoscopy unit have been working six days a week. Both quality and safety have been monitored throughout this period. The group is also working on projects to reduce premium payments and agency costs.

Women's & Children's Group

The W&C group is looking at some opportunities through MARS schemes to review the skill mix of the departments; the savings when confirmed will then be added to the CIP tracker.

At the beginning of the year the group hoped there would be an increase in births this year (delivered within existing capacity) but this has not materialised. Therefore this scheme has been removed from the group's tracker.

Community Services

The Community group managers are reviewing the level of underspend to support non-recurrently the CIP gap for the year. The impact of the under-spends will be recognised in September's position after a review from the managers of the community services. The level of underspends

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being used are not expected to affect the quality of the service but this will be confirmed by the programme office in October.

Corporate Services

The Corporate performance has improved this month through the addition of non-recurrent pay underspends in some of the departments. The vacancies in the short term are not expected to affect the quality of the services. Work is also underway to look through line by line potential opportunities for CIP schemes in the Estates department, with an increased effort to improve energy usage and efficient use of maintenance budgets. They are also looking at future savings from switching telecoms services to VOIP.

General

During September and October the programme office meetings are being planned to be used as an opportunity for a series of "brainstorming" sessions involving members from all areas and departments within the groups to generate new ideas for further savings or waste reduction programmes. The Trust will continue to widen its benchmarking opportunities throughout the UK.