

<b>Report to:</b>	Board of Directors				
<b>Date of Meeting:</b>	24 <sup>th</sup> September 2014				
<b>Report Title:</b>	Right Care Portfolio Update				
<b>Status:</b>	<b>For information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>	<b>Regulatory requirement</b>
Mark relevant box with X	X				
<b>Prepared by:</b>	Amy Whitaker, Deputy Director of Finance and Stacey Hunter, Director of Operations				
<b>Executive Sponsor (presenting):</b>	Bridget Fletcher, Chief Executive				
<b>Appendices (list if applicable):</b>					

### Purpose of the Report

This monthly update report outlines the performance of the Right Care Portfolio of Programmes in Month 5 (August 2014). It focuses on the Financial profile of all the Programmes that make up the Portfolio, alongside a programme by programme update of key actions in the activity period.

### Key points for information

The overall CIP performance in August, excluding CIP contingency, is £808k behind plan which is deterioration on the forecast position of £91k driven primarily by Improving Theatres & Acute Surgery, Improving Patient Flow & Transform, and Tactical CIP for Diagnostics. The deterioration reflects continuation of Premium Rate activity in Theatres and Acute Surgery, the inability to close beds in the first few months of the financial year due to an increase in emergency demand, and slippage on assumed income schemes within Therapies. This deterioration has had a negative impact on the operational position due to the CIP under performance being more than the contingency that is set aside. This position is expected to improve from October when key appointments to vacant posts in Anaesthetics and Surgery are in.

The year-end forecast is projected to achieve £5,427k against a plan of £7,290k. This is a £321k adverse variance against the contingency of £1,542k.

The position will continue to be monitored to ensure that the adverse variance is mitigated.

### Recommendations

- (i) The board are asked to note the performance of the Right Care Portfolio of Programmes.

## 1.0 Portfolio Status Overview

Programme:	CIP Target 14/15 (k)	CIP target (YTD)	CIP Delivered (YTD)	CIP Variance	Status to		
					Plan Delivery	Quality and Safety	Finance
Improving Patient Experience	N/A	N/A	N/A	N/A			N/A
Improving Patient Flow, Transform and Outpatients	1,300	465	179	(286)			
Improving Theatres and Acute Surgery	550	219	68	(151)			
Digital Care	500	196	0	(196)			
Workforce	1,000	414	247	(167)			
Estates	800	174	323	149			
Improving Corporate Services	600	234	295	61			
Tactical CIPs	2,540	939	720	(219)			
Total	7,290	2,640	1,832	(808)			

## 1.1 Executive Summary of Portfolio Progress

The Portfolio position as at the end of month 5 is the delivery of £1,832k against target of £2,640k, an adverse variance of £808k. This is £91k worse than the expected position and gives a year end forecast position of £5,427k against target of £7,290k, which is a year-end adverse variance of £1,863k. Overall at year end this represents £321k adverse variance against contingency of £1,542k.

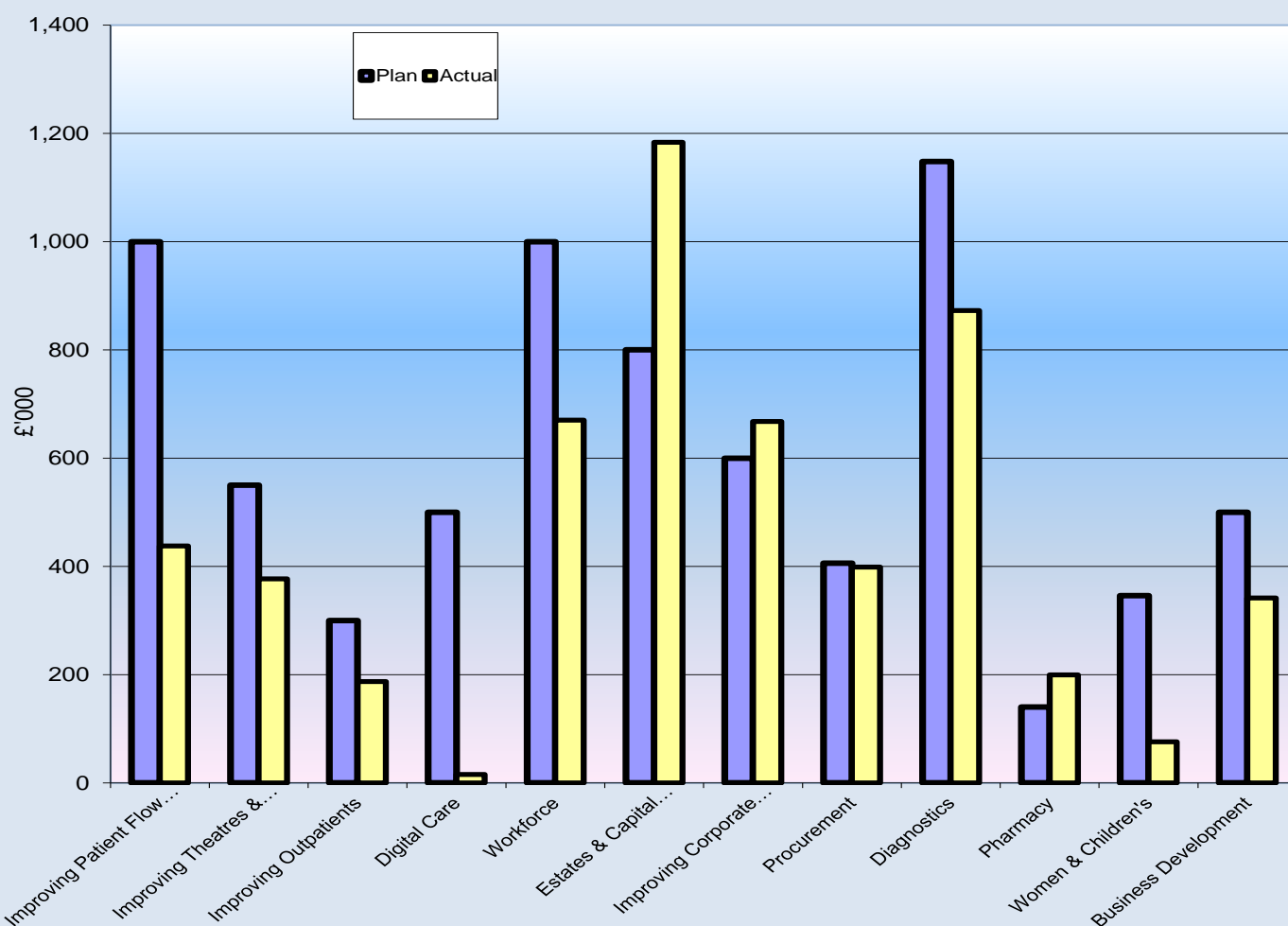
The programmes contributing to this adverse position above contingency are:

- Theatres (£173k) due to continuing agency premium costs;
- Improving Patient Flow & Transform (£145k) due to the inability to close beds as planned caused by increased emergency demand;
- Business Development (£62k) due to tenders not coming in as expected and reduced income relating to Care Closer to Home.

This has been offset by improvement in Estates (£21k) due to replacement schemes, and Pharmacy (£11k).

The Portfolio Board have also commissioned an external company who are LEAN experts and have a strong track record of supporting health organisations across the UK and internationally to review our work to date and support continued evolution and progress across the Programmes. This work commenced in September.

## 2.0 Portfolio Financial Performance inc. Tactical CIPs



	Savings to Aug-14 (to date)			Forecast to end of 2014/15			Forecast WTE Reduction	Original Forecast for Contingency to Aug-14		Original Forecast for Contingency to end of 2014/15	
	Target	Achieved	Variance	Target	Forecast*	Variance		Forecast	Variance	Forecast	Variance
	£'000	£'000	£'000	£'000	£'000	£'000		£'000	£'000	£'000	£'000
Improving Patient Flow & Transform	370	153	(217)	1,000	438	(562)	36.00	196	(43)	582	(145)
Improving Theatres & Acute Surgery	219	68	(151)	550	377	(173)	-	219	(151)	550	(173)
Improving Outpatients	95	26	(69)	300	187	(113)	-	13	14	190	(3)
Digital Care	196	0	(196)	500	15	(485)	2.60	(32)	32	(47)	63
Workforce	414	247	(167)	1,000	670	(330)	2.00	239	8	670	0
Estates & Capital Investment	174	323	149	800	1,184	383	3.00	325	(2)	1,163	21
Improving Corporate Services	234	295	61	600	668	68	3.48	262	32	668	(0)
Procurement	178	175	(3)	406	399	(7)	-	183	(8)	419	(20)
Diagnostics	429	291	(137)	1,148	873	(276)	2.70	317	(26)	880	(7)
Pharmacy	72	125	53	140	200	60	-	89	36	182	18
Women & Children's	127	15	(113)	346	76	(270)	-	19	(5)	87	(11)
Business Development	133	114	(19)	500	342	(158)	-	93	21	404	(62)
<b>Trust Total</b>	<b>2,640</b>	<b>1,832</b>	<b>(808)</b>	<b>7,290</b>	<b>5,427</b>	<b>(1,863)</b>	<b>49.78</b>	<b>1,924</b>	<b>(91)</b>	<b>5,748</b>	<b>(321)</b>

## 3.0 Programme Reporting

### Programme Reporting – Improving Quality and Patient Experience

Status to	Plan Delivery	Quality & Safety	Finance

#### Performance in Period – By Exception

- Access points funding (£50,000) has been agreed from Trust Charitable Funds to cover patient and visitor car parks and part of the way finding proposal. Charities have agreed to fund the updating of the main reception and outpatient cafe areas and presentations have been made to two charities to cover Wi-Fi and signage.
- Right Care training is on-going. Following input from the Patient and Carer panel, changes have been made to refresh the programme and make it more engaging and meaningful to staff. Bespoke sessions have been delivered to specific areas with further sessions scheduled. 2,021 staff trained to date.
- To enhance the experience in dementia care, the upgrading works have been completed on Wards 4, 6, 7 & 9 and the upgrading of Ward 13 is being undertaken.
- The reception area signage in Medical Assessment Unit (MAU) is to be adapted to be dementia friendly, dementia carer audits are being undertaken monthly and Clinical areas are using the dementia challenge tool (Self-Assessment Framework).
- The recruitment of 9 further Butterfly Support Team members has taken place bringing the total number of team members to 12. Following on there is to be an evaluation of the Butterfly Support Team.
- Future key activities - There are plans to improve the out of hours catering by using new Emergency Department (ED) facilities and by April 2015 the plan is to have new receptions, signage and parking.

#### Key Programme Risks and Mitigation

None to escalate at this time.

#### Financial Assurance

Annual Plan (£k)	YTD Plan (£k)	Delivered (£k)	Variance (£k)

### Programme Reporting – Improving Patient Flow, Outpatients and Transform

Status to	Plan Delivery	Quality & Safety	Finance

#### Performance in Period – By Exception

- Ward 15 has remained closed despite continued increased activity pressures through more effective use of short stay beds and ambulatory care.
- The efforts via the discharge work stream have yielded an increase in the number of patients discharged by 1pm from 20% to 26%.
- The number of patients in the Trust with length of stay over 14 days has significantly reduced

and has been sustained which has contributed to an overall reduction of 0.8 days in the Length of Stay for patients in the Integrated Medical Group.

- The Mental health assessment issue for East Lancashire patients has been resolved and the Continuing health care (Chc) process for East Lancashire patients has been improved, reducing waits by 21 days.
- Efforts to strengthen the Ambulatory Care Unit have resulted in an agreement regarding Acute Physicians coming off mid-week on call to provide more Consultant input to short stay and ambulatory care
- During September the single point of access work, the agreement of Standard Operating Procedures and the leadership of the Intermediate Care HUB will take place along with a process mapping event to be held for Intermediate Care in readiness for the new Intermediate Care HUB which is due to go live in October.
- Future focus - Recruitment is underway for Craven teams and dementia crisis response teams. Final Winter Plan to be agreed with the Systems resilience group by the end of September

## Key Programme Risks and Mitigation

Programme has forecast gap of £148k at year end, after non recurrent CIP contingency. This is summarised as follows:

- Reduction in length of ward closure by one month to five months - £78k
- 50% of planned agency savings due to increased activity - £45k
- Additional cost of short stay beds - £4k
- Shortfall on contingency added - £24k

Situation remains volatile and will continue to be managed by programme team with further opportunities to close the gap either via income associated with the increased activity when it is secured or new schemes being explored on an on-going basis.

## Financial Assurance

Annual Plan (£k)	YTD Plan (£k)	Delivered (£k)	Variance (£k)
1300	465	179	286

## Programme Reporting – Improving Theatres and Acute Surgery

Status to	Plan Delivery	Quality & Safety	Finance

## Performance in Period – By Exception

- Karl Mainprize has assumed the role of Executive Sponsor Lead to use his expertise to improve clinical engagement and assist in the driving of achievement of improvement targets.
- Theatres are running at 98-100% utilisation on a consistent basis with a reduction in the number of on the day cancellations due to over booked lists with improved scheduling.
- Sessions starting on time is a key deliverable for the next quarter. A productivity audit is to be undertaken regarding start and finish times of lists, overruns and impacts both on afternoon list and out of hours Acutes.
- An e-Rota business case is to be presented to next surgical Directors Assurance Group (DAG) to improve utilisation of anaesthetic staffing and support further reductions in premium payments and agency usage within anaesthetics.
- Premium payment/agency usage now tracked with finance and system for accrual put in place and monitored weekly as the overspend in premium payments continues to overspend owing to pressures on 18 weeks and vacancies.

- A decision is required on how to further support the Exemplar Theatre programme via the Service as the Service Improvement Lead; Will be considered by the Portfolio Board

## Key Programme Risks and Mitigation

Behind financial plan – revised forecast to pull position back from September onwards on the back of further substantive appointments and less junior doctor gaps. Remains a risk but there is a detailed recovery plan with associated actions in place with the General Manager and Clinical Directors in the surgical group.

## Financial Assurance

Annual Plan (£k)	YTD Plan (£k)	Delivered (£k)	Variance (£k)
550	219	68	151

## Programme Reporting – Digital Care

Status to	Plan Delivery	Quality & Safety	Finance

## Performance in Period – By Exception

- E-discharge final end to end testing to take place prior to Clinical Acceptance. Training documentation requires completion with the aim to Go Live on Ward 7 week commencing 8th September subject to sign off.
- Electronic Prescribing and Medicines Administration (EPMA) - experienced problems with prescribing syringe drivers and an mg / ml issue. TTP who supply SystmOne have agreed changes to formulary presentation.
- Initial Service Requesting meeting has taken place but is now delayed due to TPP resource constraints.
- Therapies project activities have started and this has been handed over to Rebecca Malin. A Project Initiation Document (PID) is currently being awaited from Central Support Unit (CSU).
- Paper Light (Electronic Digital Medical Record -EDMR) Brief to be submitted to the next Programme Board and there may be some overlap with Outpatients).
- Future focus - E-Strategy/System Enablers and the option to replace / upgrade key departmental systems. Endoscopy & Cardiology are prime candidates.

## Key Programme Risks and Mitigation

E-discharge testing on Ward 7 – delayed to ensure adequate time for communications to GP. Not a material impact.

## Financial Assurance

Annual Plan (£k)	YTD Plan (£k)	Delivered (£k)	Variance (£k)
500	196	0	(196)

## Programme Reporting – Workforce

Status to	Plan Delivery	Quality & Safety	Finance

### Performance in Period – By Exception

- The Advance Nurse Practitioner (ANP) business case has been progressed via Executive Delivery Group (EDG) and Clinical Executive Group (CEG) and financial modelling is currently underway prior to recruitment commencing.
- A position paper on future workforce design is currently with key internal stakeholders for consultation. A sub group is in the process of being established to steer workforce redesign once the Workforce Design Framework is in place.
- Discussions with unions concluded on pay protection and paid breaks and the message regarding breaks needs to be communicated to Trust Staff.
- The Staff Open Day which focussed on staff benefits took place and the First Pride of Airedale Awards was launched. Further publicity is planned around the reward and recognition scheme.
- Future key activities - development of a tender for e-Rostering and the Mutually Agreed Resignation Scheme (MARS) application process being completed.

### Key Programme Risks and Mitigation

Nothing new to report

### Financial Assurance

Annual Plan (£k)	YTD Plan (£k)	Delivered (£k)	Variance (£k)
1000	414	247	(167)

## Programme Reporting – Estates

Status to	Plan Delivery	Quality & Safety	Finance

### Performance in Period – By Exception

- Ward 13 refurbishment has started and Wards 9, 18, 4, 6 & 7 are completed. The ED is now 70% complete.
- Initial PLACE results linked to increasing patient safety and reducing risks are much improved and with release to the public on 27<sup>th</sup> August 2014.
- Costs have now been received for the Security contract tender.
- Sustainability - the Lighting upgrade is 100% complete with lighting to the tunnel to be completed. The Waste Partner audit has been completed and the Waste Partner Project report is due. A waste digester is to be installed and Theatre ventilation is still to be completed. Combined Heat and Power (CHP) go live is 19th September and New Ecoaware/ Sustainability meetings commenced.
- Future key activities - work to commence on pedestrian crossings, pathways finalisation of access rights for emergency egress and development and further analysis of electrical usage across site is also scheduled to take place.

## Key Programme Risks and Mitigation

Nothing new to report

## Financial Assurance

Annual Plan (£k)	YTD Plan (£k)	Delivered (£k)	Variance (£k)
800	174	323	149

## Programme Reporting – Improving Corporate Services

Status to	Plan Delivery	Quality & Safety	Finance

## Performance in Period – By Exception

- Corporate Service Framework to be completed in preparation for the Corporate Services Design Workshop aimed to prepare and scope, objectives and deliverables, design a visual concept of how a future corporate service function may look and identify the generic skills of a corporate worker.
- This is to be followed by a Corporate Directorate Workshop Event scheduled for the 30<sup>th</sup> October.
- Pooled budgets were introduced on the 1<sup>st</sup> July and within the Finance Directorate sub-working groups presenting progress updates at timeout sessions.
- There has been continued analysis and assessment of submitted benchmarking data and Shared Service options are being considered with the Local Authority.
- Concerns have been raised regarding a lack of adequate account management to retain existing contracts e.g. Telemed, OCC health, Sterile Services. Directors Assurance Group is looking at mitigation and hand off between development and delivery.

## Key Programme Risks and Mitigation

Nothing new to report

## Financial Assurance

Annual Plan (£k)	YTD Plan (£k)	Delivered (£k)	Variance (£k)
600	234	295	61