

Red	Amber	Green
No Assurance	Limited Assurance	Significant Assurance

Name of Meeting:	Finance Performance & Digital Committee
Date of Meeting:	29 September 2020
Prepared by:	David Wharfe, Chair of Committee/Non-Executive Director

Key Highlights from the meeting		
	Highlight	RAG Rating
1.	The majority of services provided by the Trust have now recommenced, with a focus on cancer, clinical triage of new and follow up work and reducing the longest waits.	A
2.	The Committee received a report detailing the proposed strategic direction for the electronic patient record. The Committee supported the recommendation to move to a full business case for an electronic patient record for acute areas, hosted by BTHFT, and to commence an engagement process to support the way forward.	A

Assurances gained at the meeting		
	Assurance	RAG Rating
1.	Internal Audit have reviewed the Trust COVID-19 financial governance arrangements and concluded there is high assurance that the Trust has robust systems in place to approve, monitor and record additional expenditure incurred in the response to COVID-19 and that there is sufficient evidence available to validate the costs claimed.	G
2.	CIP delivery plans are being developed as part of the reset of services to ensure recurrent financial stability. Those plans will need to be included within future monthly reports to the Committee.	A

Issues or emerging risks		
	Issues or emerging risks	RAG Rating
1.	The mortality data narrative within the Integrated Board Report was unclear. The Committee requested this section be reviewed and that the addition of benchmarking data at ICS level would be a valuable addition for future reports.	R
2.	The Committee requested further information to understand how the Trust was benefiting from the national purchasing agreement with the independent sector, and to include benchmarking data in this respect at ICS level.	A
3.	There has been an increase in the number of patients with an open pathway who have waited in excess of 52 weeks for treatment. Assurance was given that as we recommence care against all elective settings, those patients would be treated in order of clinical priority.	A
4.	Additional demand has placed increased pressure on the emergency bed base and additional capacity will need to be sourced to manage this demand. The need for additional beds was noted, but subject to an increase in the nursing workforce.	A

5.	The Committee received a presentation on the Trust reset plan and financial framework for the six month period from October 20 to March 21. The reset plan would be at a cost of £6.8 million non- recurrently including costs associated with the winter bed plan of £2million. The Committee agreed to support the recommendation to submit the plan, based on the assurance given by executive colleagues that the Trust would deliver a balanced position overall, including the requirement to identify cost improvement plans of £2.2 million. It was agreed that plans would be prioritised and also scaled back to ensure financial balance. Assurance was also given that the principle across the ICS plans was to ensure all Trusts achieve financial balance.	A
6.	The Committee received a report detailing the improvement plan developed to support adherence to the Better Payment Practice Code targets. Although some improvement had been noted in recent months, it was clear that the Trust performance was still at a low level. The Committee requested further work be done in this area, and this matter would continue to be a matter of focus.	R

Any other comments

Formal confirmation is still awaited from NHSI to fund the discrepancy of £8.5million between the Trust and NHSI plans. This has been brought to the attention of the Board in previous reports. Further delay in written agreement is not helpful, and this should be closed off as a matter of priority.

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Name of Meeting:	Finance Performance & Digital Committee
Date of Meeting:	27 October 2020
Prepared by:	David Wharfe, Chair of Committee/Non-Executive Director

Key Highlights from the meeting		
	Highlight	RAG Rating
1.	Operational performance as at 30 September is good. There has been an increase in the number of Covid related cases occupying beds. Similarly non elective demand is now on a par with January 2020 levels. Elective performance was on track, however, given the pressure on bed capacity a decision has been made to pause elective activity other than urgent, cancer and day case.	G
2.	The Committee received a presentation on the Trust reset plans and the Trust's contribution to managing the deficit position across the ICS. Peer review of the Bradford District and Craven place plan has resulted in the Trust receiving an additional Covid allocation of £2.4m from the ICS. The reset plan identifies the Trust with a balanced financial position.	G
3.	The Committee received a presentation on the Digital Care Hub, its services and links to Immedicare and the opportunities afforded by the Trust's telemedicine services. It is recommended that the future direction of the Digital Care Hub would be usefully debated at greater length as part of a forthcoming Board Strategy session.	A

Assurances gained at the meeting		
	Assurance	RAG Rating
1.	Confirmation was received that the previously identified income discrepancy of £5.1million has been resolved with NHSI/E.	G
2.	The underlying position at Month 6 is a balanced position in line with the Covid financial regime.	G
3.	The Trust has commenced savings plans to deliver cost improvement targets, equating to £3.5 million to ensure recurrent financial stability.	A
4.	In reviewing the current 5 year Capital Plan, agreement was reached that expenditure would need to be prioritised within the allocation received. At this stage the ICS prioritisation of Capital is unknown. A further update will need to be provided to the February meeting.	G
5.	There is a expectation that the risk in relation to the Immedicare Firewall will be resolved by week commencing 24 November.	G

Issues or emerging risks		RAG Rating
1.	The Trust is planning to deliver a £1.3million deficit in this financial year.	G
2.	The new financial reporting arrangements would commence from Month 7, and as a result variances from budget would feature in future financial statements.	G
3.	The Committee received an update on the Commercial Strategy and Business Development initiatives within the Trust. Future reports would provide clarity on the framework for prioritising commercial opportunities.	A

Any other comments