

Agenda Item		2.3 (iii)
Freedom of Information Status	Open	
Reporting Committee	Performance and Finance Committee	
Author	Claire Mulcahy, Corporate Governance Manager	
Chaired by	Reena Owen, Independent Member	
Lead Executive Director (s)	Darren Griffiths, Interim Director of Finance	
Date of last meeting	22 June 2021	

Summary of key matters considered by the committee and any related decisions made:

• Financial Position

The agreed annual plan for 2021-22 indicated a £42m year-end deficit but an assumed non-recurrent fund of £17.672m from Welsh Government for unachieved savings in 2020-22 brings the controlled deficit to £24.4m. The month 2 position saw an overspend of £0.528m and £4.105m cumulatively. The in-month position reflects 2/12ths of the £17.672m assumed funding to support 2020/21 non-achievement of savings impact. Both Pay and Non-pay budgets reported underspends in month 2. Focussed work was underway with those service groups with overspends in particular within Mental Health and Learning Disabilities in relation to Continuing Healthcare costs. Key actions in train for this financial year including; monthly performance reviews to replace financial reviews and the implementation of the performance framework, increased compliance with control measures and the implementation of the Business Case Assurance Group to support scrutiny of business cases. Further pipeline savings opportunities to be identified and a focus on the turning red schemes to green.

• Financial Recovery

A presentation set out the four agreed phases of work to support the financial recovery plan; the validation of the underlying deficit, the development of a composite savings opportunity list, the development of opportunities through an allocation, utilisation and outcome approach and understanding the consequences of investment/disinvestment of any strategic service vision. Further reviews had taken place of the opportunities highlighted by KPMG of which £27m had been identified. Independent sources had identified efficiency savings of between 250-300 beds equating to 70k bed days per year. An important factor for consideration is the allocation, utilisation and outcomes of the health board budget spend. From this, key questions are being asked; can we see the totality of commissioner spend, are we spending our allocation in an equitable manner, are there variations between clusters and practices and are we shifting care from hospital to community;

Matters raised by members;

- Relative spend and variation between clusters. The highest spend in the wealthiest areas of Swansea Bay;
- The health board continues to be underfunded in terms of the 'Population Share'

Key risks and issues/matters of concern of which the board needs to be made aware:

- **Integrated Performance Report**

The number of new COVID-19 cases as well as bed occupancy rates continued to reduce. Demand for emergency department care had increased with attendance now at pre-COVID levels. The number of clinically optimized patients stood at 180 in May 2021 and numbers were increasing. An in-month increase in May 2021 in the number of patients on the waiting lists, now noted at a total of 83k. Healthcare acquired infections performance remained fairly static and inpatient falls had increased during May which is an indicator of pressures in the system. April 2021 saw a deterioration in performance against the Single Cancer Pathway (SCP) with only 60% of patients starting treatment within 62 days. The SCP backlog had also increased. Performance against the Mental Health Measure was maintained but access times for routine Child and Adolescent Mental Health Services (CAMHS) had significantly deteriorated in April 2021.

Matters raised by members;

- *Staff sickness figures*; particularly those in relation to mental health and wellbeing, a referral to be made to Workforce and OD Committee;
- *Performance within CAMHS*; An update on mitigating actions has been requested for next committee;
- *Cancer Performance*; A key priority for the health board and members were informed of the increased focus via the Planned Care Board and weekly deep dives;
- *Theatre efficiency*; COVID-19 de-contamination requirements and scrub workforce – mitigating actions include a revised Standard Operating Procedure, outsourcing to reduce theatre lists and increasing capacity within the physical theatre infrastructure;

- **Unscheduled Care Update**

Performance against the unscheduled care Tier 1 remains below the expected level, and activity levels were now at pre-COVID levels in both Morriston and Neath Port Talbot Minor Injury Unit. There were increasing levels of Clinically optimised patients in the system and undue delays in discharge packages of care, care homes and home discharges and social work assessment. Significant work was underway within the urgent and emergency care plan including the opening of the urgent primary care centre, virtual wards and move of the acute general practitioner out of hours service to Morriston site although this had been delayed until November 2021. There was also a focus on improving operational grip and control via the piloting of the 'Perfect Week' at ED which will monitor flow through the department to understand blockages in resources or exit routes. There is also an update to the Safer Policy to aid discharge processes.

Matters raised by members;

- *Exit routes and medical resource issues* within the current ED model;
- The rising numbers of *clinically optimised patients* in the system; an update to be provided to committee and discussion with local authorities partners for a joint approach to solutions;
- Patients waiting at emergency department; access to GPs, changes in public behaviours and public communication in terms of re-direction from emergency department;

Delegated action by the committee:

There were none.

Main sources of information received:

- Integrated Performance report;
- Unscheduled Care Update

- Finance report;
- Financial Recovery Presentation
- Financial Monthly Monitoring Returns.

Highlights from sub-groups reporting into this committee:

No reports received from sub-groups.

Matters referred to other committees:

- Referral to the Workforce and OD Committee due to concerns with staff sickness levels, particularly those related to mental health and wellbeing.

Date of next meeting

27th July 2021



GIG
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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



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Author	Claire Mulcahy, Corporate Governance Manager		
Chaired by	Reena Owen, Independent Member		
Lead Executive Director (s)	Darren Griffiths, Interim Director of Finance		
Date of last meeting	25 May 2021		
Summary of key matters considered by the committee and any related decisions made:			
<ul style="list-style-type: none">Integrated Performance Report The report set out the full year performance from March 2020 to March 2021. Current demand for the emergency department had increased but was not at pre-COVID levels. Ambulance handovers stood at 72% for April 2021 and 4 hour waits stood at 74.9%. During the year, pressure had been evident in serious incident reporting but this had improved particularly within mental health. An increase in hospital acquired pressure ulcers and falls had been evident during November and December 2020 but improvements were seen as the pressures of the 2nd wave eased by February 2021. The percentage of staff undertaking performance appraisals had decreased during 2020-21 with levels at 53.15% and work was underway to address this performance. The 12-month performance for sickness stood at 7.50% between March 2020 and February 2021 but an in-month improvement had been seen in February 2021 to 6.41%.Quarterly (3&4) Operational Plan – Delivery of Actions A good level of progress had been achieved with 62.7% of actions completed, 11.9% on track and 25.4% not delivered at year-end. Those non-delivered would be carried forward into 2021-22.			
Key risks and issues/matters of concern of which the board needs to be made aware:			
<ul style="list-style-type: none">Quarter 4 – Continuing Healthcare (CHC) Performance Report There were significant challenges across the care home sector and partnership working continues with careful monitoring of care homes at risk. Care home fragility and sustainability as well as the vacancy factor were concerning for members, as well as the quality and safety aspects. Progress within CHC depended on the outcome of the awaited Welsh Government report and concerns were raised about the fact the health board did not know what provisions were required for the area. The increase in cases and costs were also concerning. An increase in requests for funded nursing care placements was evident as well as increases in rates. Work was underway to understand what was driving CHC cost growth, particularly within Mental Health and Learning Disabilities.			
Delegated action by the committee:			
None			

Main sources of information received:	
<ul style="list-style-type: none"> • Integrated Performance report; • Quarter 4 CHC Report • Update on SIGNAL System • Quarterly Operational Plan – Delivery of Actions • Financial Monthly Monitoring Returns 	
Highlights from sub-groups reporting into this committee:	
No reports received from sub-groups.	
Matters referred to other committees:	
None.	
Date of next meeting	22 June 2021