

**FINANCE AND PERFORMANCE ACADEMY
MINUTES, ACTIONS & DECISIONS**

Date	27 September 2023	Time:	08:30-10.30
Venue:	Via Microsoft Teams	Chair:	Julie Lawreniuk, Non-Executive Director (JL)
Present:	<ul style="list-style-type: none"> - Sajid Azeb, Chief Operating Officer / Deputy Chief Executive (SA) - Matthew Horner, Director of Finance (MH) - Chris Smith, Deputy Director of Finance (CSm) - Carl Stephenson, Associate Director of Performance (CS) - Michael Quinlan, Deputy Director of Finance (MQ) - Shaun Milburn, Deputy Director of Operations – Unplanned Care (SM) - Dr John Bolton, Deputy Chief Medical Officer (JB) - Joanne Hilton, Deputy Chief Nurse (JHi) - Ellie MacIver, Deputy Director of Operations for Cancer and Diagnostics - Karen Walker, Non-Executive Director (KW) - Louise Bryant, Non-Executive Director (LB) - Terri Saunderson, Director of Operations (TS) - Neil Scott, Head of Business Intelligence (NS) - Rachel Waddington, Deputy Director of Operations Planned Care (RW) 		
In Attendance:	<ul style="list-style-type: none"> - Laura Parsons, Board Secretary/Associate Director of Corporate Governance (LP) - Katie Shepherd, Corporate Governance Manager (KS) 		

No.		Action
FA.9(1).23.1	Apologies for Absence	
	<p>The following apologies were noted:</p> <ul style="list-style-type: none"> • Mohammed Hussain, Non-Executive Director • Chris Danson, Director of Transformation • James Taylor, Deputy Chief Operating Officer 	
FA.9(1).23.2	Declarations of Interest	
	No declarations of interest were made.	
FA.9(1).23.3	Unconfirmed Minutes of the Meeting held 26 July 2023	
	The minutes of the meeting held on the 26 th July 2023 were approved as an accurate record.	
FA.9(1).23.4	Matters Arising	
	<p>The Academy reviewed and updated the action log. The following action updates were noted and the actions closed:</p> <ul style="list-style-type: none"> • FA230034. MH has shared the slides presented on the Waste Reduction Plan. • FA230036. JL included the impact of the industrial action on the waste reduction programme in her Chairs report to Board in September. 	

No.		Action
	Assurance	
FA.9(1).23.5	Finance & Performance Academy Effectiveness Review	
	<p>JL introduced the Academy Effectiveness Review survey and invited colleagues to respond openly and honestly in response to the questions raised during the survey. The outcomes from the survey would be used to support any improvements required to the operation of the Academy. She advised that whilst responses would be seen live during the survey, there would be limited discussion around these at this meeting in order to allow for a more detailed report to be brought back to a future meeting.</p> <p>The following questions were asked during the survey with a brief overview of each response detailed:</p> <ul style="list-style-type: none"> • 'Have the meetings improved in the last 12 months?' – the majority of attendees responded 'yes' • 'How can we improve further?' – comments were made including the need for further contribution, more time for discussion, and the desire for the occasional face to face session • 'Are you clear on the purpose and remit of the Academy, and what your role is as a member of the Academy?' – the majority of attendees responded 'yes' • 'What could we do to make it easier for you to challenge and ask questions?' – comments were made including more time to reflect on presentations, holding meetings face to face to encourage contribution, and considering how to make virtual meetings more interactive • 'Do the meetings include the right mix of learning, improvement and assurance?' – the majority of attendees responded 'yes, mostly' • 'Which areas need more focus if we are to improve the mix of learning, improvement and assurance?' – areas mentioned included waste reduction, how we are learning and seeking best practice, focus on deeper discussions rather than including every item every week • 'Do we have the right people involved?' – suggestions were made on wider inclusion of CSUs, reducing attendees given not all contribute, and the need for more consistent NED representation <p>As agreed, LP would review all responses and bring a more detailed update on possible ways to improve to the next Academy meeting including the potential for a face to face meeting every quarter and how best to engage CSUs into attending some meetings.</p>	Board Secretary FA230037
FA.9(1).23.6	Finance & Performance Academy Work Plan	
	LP confirmed that no changes had been made to the workplan since the last meeting.	
FA.9(1).23.7	Finance & Performance Academy Dashboard	
	SA and MH confirmed that the details within the dashboard would be discussed under the relevant agenda items later in the meeting.	

No.		Action
FA.9(1).23.8	High Level Risks Relevant to the Academy	
	JL noted that no new risks had been added to the register and no existing risks had changed in score or been closed since the last meeting.	
	Learning & Improvement	
FA.9(1).23.9	Finance Improvement Plan	
	<p>CSm provided an overview of the presentation which gave an update on CSU WRP responses and impact on forecast position for 2023/24 and 2024/25. He highlighted the following key points:</p> <ul style="list-style-type: none"> • There is a forecasted £3.6m deficit for 2023/24. MH had sent a letter to all budget holders in August to highlight the risk of this forecast and ask for recurrent run rate improvements in half 2 to prevent this deficit occurring and to improve the exit run rate. Without the £16m non-recurrent measures there would be an estimated £20m deficit. • If the Trust was to enter 2024/25 with a £2m monthly deficit, 2024/25 would begin with a £24m deficit on top of the usual annual pressures such as inflation, increase in utility costs, tariff efficiencies etc. This would likely result in a deficit of around £40m at the start of 2024/25. • The CSUs had received a letter from MH asking them to improve on delivery of their targets. Responses had been received and as a result of this, CSUs predicted a £1.4m improvement on the forecast, but there would still be a £2.1m deficit. • Even if the CSUs delivered this £1.4m in full, there would be a £20.5m deficit opening 2024/25 which is still far from where the Trust needs to be. • Month on month improvements are needed and CSUs will continue to be asked to improve their forecasts. There needs to be increased rigor and governance around waste reduction, delivery and overall budget management. For escalated CSU's there will be a monthly financial performance review meeting providing oversight, challenge and support. The meetings will be chaired by Deputy Directors of Operations with representatives from the service area triumvirate. • The Trust also needs to strengthen the financial controls recommended by NHS England such as tightening agency controls and reviewing roster efficiency. • Further investigations were needed to identify possible non-recurrent measures that can be put in place in case the forecast is not improved. <p>MH advised that £200m has been released nationally to support winter, and BTHFT will likely receive a share of this which will go directly to help offset the bottom line. It is not expected that new spend will be incurred on the back of this funding.</p> <p>This was discussed further under item FA.9(1).23.11, Monthly Finance Report.</p> <p>The Academy noted the finance improvement plan.</p>	

No.		Action
FA.9(1).23.10	Operational Improvement Plan – Urgent and Emergency Care	
	<p>SM introduced the operational improvement plan presentation and highlighted the following key points:</p> <ul style="list-style-type: none"> • There were some key areas of transformation regarding inpatient care, changes to wards, the closed emergency department model. • A capacity and demand modelling for stroke indicated a gap between current bed capacity and required demand (24 bed gap). Ward 9 is due to open as a stroke rehabilitation ward in November 2023 which will improve care for stroke patients and improve the SSNAP score in relation to admission to a stroke ward. • A younger persons frailty ward model has been developed given the level of health and social deprivation in some areas of Bradford resulting in comorbidities related to frailty being much more prevalent at a younger age. In November, ward 17 will open as a younger persons frailty ward managed by the Care of the Elderly CSU. • Within General Internal Medicine there is a gap for those patients who have multiple underlying comorbidities whereby one single speciality does not have the full overview of a patient. Patients with multiple comorbidities also tend to have increased length of stay and high re-admission rates. As a result, over the next 12 months, a model for ward 27 will be developed with a view to designing a multi-disciplinary committee ward, led by acute physicians but supported by speciality consultants. Phase 2 of this model will expand to include surgery. • The plan for the next three months is to combine two areas of A&E (green zone and SDEC) into one co-located area managed jointly by acute medicine and emergency department staff. This will likely be called the ambulatory emergency care unit. • Through proactive performance management, the Trust is aiming to improve ambulance handovers with recent works completed to increase ambulance assessment capacity by 20%. • Workforce planning continues, in particular aiming to ensure the medical workforce is sustainable 24/7 and ensuring increased consultant cover in key areas. • There is a winter stretch target for all Trusts in reaching 80% of the ECS performance standard in Q4 and maintain above 90% ambulance handovers within 30 minutes. Trusts that are successful in reaching this target could have access to a bid for a proportion of some capital monies next year. <p>SA recognised that the changes are not just to ensure improved performance but rather fundamentally about an increase in quality of care for patients by ensuring patients are in the correct ward looked after by the right speciality as early as possible.</p> <p>SA also highlighted that the local authority is under significant financial pressure and there are ongoing discussions about their ability to keep intermediate care facilities open, with one care home already having closed.</p> <p>KW noted that the layout of the presentation pack served well for</p>	

No.		Action
	<p>displaying improvements in a clear way and clarified the steps being taken day-by-day, future focused and more strategically. She also echoed SAs previous point regarding the outcomes being focused around quality and patient care.</p> <p>TS reflected on the three ward changes, which have been long held ambitions for the organisation and have been challenging for years and will now make a substantial difference to A&E performance throughout the winter.</p> <p>LB referred to the MDC ward and the need to ensure that there are psychiatry and mental health specialists within the mix of those adding input given that several co-morbidities are often in relation to mental rather than physical health.</p> <p>Colleagues recognised that this would be an ideal area for CSUs to come back to a future academy meeting and report back on the improvements as the changes are put into effect.</p> <p>The Academy noted the improvement plan and put on record their thanks to colleagues for their work on these transformational projects.</p>	
	Finance	
FA.9(1).23.11	Monthly Finance Report	
	<p>CSm and MQ provided an overview of the monthly finance report and made the following highlights:</p> <ul style="list-style-type: none"> • The income expenditure position showed a £2.2m deficit, with the full value representing an in month variance following four months of a breakeven position. The Trust had been deploying non-recurrent flexibility to offset the costs of industrial action but this is no longer sustainable. This approach is consistent with other Acute providers in the ICS who are also reporting deficits as a result of the industrial action. If the industrial action costs are excluded the Trust still has an underlying deficit of £4.3m. • In terms of the forecast income and expenditure position, the underlying deficit for 2023/24 excluding industrial action costs is projected to be £19.5m. it is currently projected that all non-recurrent measures will be exhausted in Quarter 4 and the Trust will fall into unmitigated monthly run rate deficit at this point, posting a £3.6m year-end deficit position. If no external funding is provided by NHSE to offset the costs for industrial action, the forecast year-end deficit would be £9.3m. • In terms of the waste reduction programme progress, this is projected to deliver £22.4m of improvement which is £6.4m below plan. £11.7m of these savings are non-recurring in nature leaving a balance of £10.8m of true efficiencies forecast to be delivered in 2023/24. • The total non-current assets are £231.2m as at 31 August 2023. The year to date variance from plan is mainly due to capital expenditure being lower than planned. The forecast closing cash position is 	

No.		Action
	<p>currently reported higher than plan due to additional external funding received for a number of capital schemes, in particular the Endoscopy Transformation Project.</p> <ul style="list-style-type: none"> Total current assets are £88.1m which is £12.9m higher than plan. This is due to cash being above plan cash by £5.1m and other receivables of £7.8m. <p>KW queried whether staff at all levels were focused on waste reduction, in a bid to identify all possible opportunities for improving the position. MH recognised that further discussions were needed on how best to encourage the focus on the finances, but in a sensitive way so as to recognise the difficulties faced operationally. There are a number of areas that are known to be both operationally and financially inefficient and evidence needs to be shared and used as examples of opportunities to improve (for example the rationalisation and decontamination of theatre instrument trays). Consideration needs to be given to embedded processes sustainably rather than have small periods of time where there is a focus on it and then it is forgotten about. CSM noted that CSUs need to encourage their teams to focus on the waste reduction programme and encourage a bottom-up approach, with all involved and engaged in the programme.</p> <p>SA reflected on the mindset change needed, given that the last couple of years have not been money focused. There has not been the pre pandemic focus on the money for a number of years, but this needs to return and be given equal importance along with quality and performance and with a specific focus on improving productivity and efficiency. There have been discussions amongst the executive team around a specific finance focused workshop similar to the delivering operational excellence event held the previous week.</p> <p>LB asked whether there is any assurance that in areas such as research, the Trust is receiving value for money for delivering research projects. MH advised from a costing/ financial management perspective, the processes had been independently assessed with strong assurance provided, with robust processes in place.</p> <p>The Academy noted the report.</p>	
FA.9(1).23.12	Procurement Update	
	<p>MQ introduced the update and highlighted the following:</p> <ul style="list-style-type: none"> Since the beginning of the covid pandemic, PPE has been centrally managed. By the end of 2024, the PPE push will end and so the level of PPE push stock will be reduced throughout the year until March 2024. This is being monitored and managed on a quarterly basis but it is anticipated that there will be an additional cost of around £1m for PPE stock in 2024/25. The approach to tendering for goods and services has been adjusted to look beyond the usual cost and quality considerations when making purchases. This now includes a 10% weighting for social value in all 	

No.		Action
	<p>tenders which reflects social, economic and environmental benefits.</p> <ul style="list-style-type: none"> The WY&H ICS has appointed a (part time) Procurement Director and a Project Manager to co-ordinate and support the development of procurement collaboration opportunities. A monthly meeting of NHS ICS Heads of Procurement has been set up and a programme of collaborative procurement opportunities is being developed. Inflation continues to be a risk and is managed and mitigated through strategic supply relationships (NHS Supply Chain and Bunzl Healthcare) and competitive tendering and seeking savings wherever possible. <p>The Academy thanked MQ and noted the update.</p>	
FA.9(1).23.13	Final Annual Accounts 2022/23: Administration and Estates	
	MH reported that work was ongoing to understand how to benchmark admin and clerical costs across the organisation as is already done on corporate teams. As yet, there is limited information that would facilitate a benchmarking exercise beyond the corporate level. Work continues and an update will be provided to a subsequent Academy meeting.	
	Performance	
FA.9(1).23.14	Operational Highlight Report	
	<p>CS provided an overview of the report:</p> <ul style="list-style-type: none"> In relation to demand patterns, there have been a busy couple of weeks of A&E attendances and high fast track referrals. In terms of inpatient pathways, there has been an improvement to start times for theatres but a deterioration in total utilisation of capacity in August. The team continues to investigate why this is the case but this is a pattern seen during the previous summer holiday period. Industrial action is having a significant impact on activity. The impact on RTT isn't as pronounced in BTHFT due to the work we have been undertaking with medinet as well as the pathway validation work we have undertaken. We are however noting a much larger impact now due to the recent change in legislation which does not allow us to use agency provision to cover the impact of the strike. Diagnostics is an area of significant challenge, but the recovery plan is starting to show small signs of improvement and work is ongoing in the background to stabilise these services. <p>The Academy noted the report.</p>	
FA.9(1).23.15	Performance Report	
	The detail within this report was covered under agenda item FA.9(1).23.14.	

FA.9(1).23.16	Feedback from Delivering Operational Excellence Workshop – 12 September 2023	
	SA provided an update on the event held on 12 th September, stating that the purpose was to help design the operational excellence plan for the next 18-24 months. The event was supported by a number of executive colleagues. We were able to share with CSU teams the success of the previous plan and ensure input from the CSUs to the key actions that need to be undertaken to ensure the aspiration of consistently delivering top quartile performance and then moving to top decile. Participants were asked to identify the 'Rocks in the Shoes' the issues that will get in the way of delivering the aspiration. so that we can work to overcome these and ensure better ability to achieve the aspiration. A Delivering Operational Excellence plan will be developed to set out aspirations for the next 18 months and SA would bring this back to the Academy when available.	
FA.9(1).23.17	Any Other Business	
	No other business was raised. JL thanked the attendees for their time.	
FA.9(1).23.18	Matters to Share with Other Academies	
	There were no matters to share with other Academies.	
FA.9(1).23.19	Matters to Escalate to Board	
	JL will alert the Board to the concerning financial position and the impact of the industrial action on the waste reduction delivery.	
FA.9(1).23.20	Date and Time of the Next Meeting	
	1 November 2023 – 08:30-10:30	

**BRADFORD TEACHING HOSPITALS NHS FOUNDATION TRUST
ACTIONS FROM THE FINANCE AND PERFORMANCE ACADEMY – 27 September 2023**

Action ID	Date of Meeting	Agenda Item	Required Action	Lead	Timescale	Comments/Progress
FA230033	26.07.23	FA.7(2).23.8	Act As One Programme Update HF to circulate information on the Act as One Awards and members to consider nominating.	Act as One Programme Director (Access)/All	01.11.23	Information has been circulated via our regular comms updates. The team has received several nominations from BTHFT colleagues. Action closed
FA230037	27.09.23	FA.9(1).23.5	Finance & Performance Academy Effectiveness Review As agreed, LP would review all responses and bring a more detailed update on possible ways to improve to the next Academy meeting including the potential for a face to face meeting every quarter and how best to engage CSUs into attending some meetings.	Board Secretary/ Associate Director of Corporate Governance	01.11.23	A verbal update is scheduled to be provided at the meeting under agenda item FA.11(1).23.9
FA230035	26.07.23	FA.7(2).23.10	Operational Improvement Plan – Cancer and Diagnostic Performance National and local directives to be listed separately in the next update.	Deputy Chief Operating Officer	29.11.23	Next update to the Academy due on 29 November.
FA230038						