

Bolton NHS Foundation Trust – Board Meeting 19 December 2019

Location: Boardroom

Time: 0900

| <i>Time</i> | | <i>Topic</i> | <i>Lead</i> | <i>Process</i> | <i>Expected Outcome</i> |
|---|-----|--|-------------|----------------|---|
| 09.00 | | Patient Story | DoN | | For the Board to hear a recent patient story to bring the patient into the room (Press and public will be excluded to preserve confidentiality) |
| 09.30 | 1. | Welcome and Introductions | Chairman | verbal | |
| | 2. | Apologies for Absence | Trust Sec. | Verbal | Apologies noted |
| | 3. | Declarations of Interest | Chairman | Verbal | To note any declarations of interest in relation to items on the agenda |
| | 4. | Minutes of meeting held 28 th November 2019 | Chairman | Minutes | To approve the previous minutes |
| | 5. | Action sheet | Chairman | Action log | To note progress on agreed actions |
| | 6. | Matters arising | Chairman | Verbal | To address any matters arising not covered on the agenda |
| | 7. | Chairman's Report | Chairman | Verbal | To receive a report on current issues |
| 09.40 | 8. | CEO Report including reportable issues | CEO | Report | To receive a report on any reportable issues including but not limited to SIs, never events, coroner reports and serious complaints |
| Safety Quality and Effectiveness | | | | | |
| 09.50 | 9 | Urgent Care Delivery Board Chair Report and seasonal plan update | CEO/COO | Report | To receive a report on the Urgent Care Delivery Board |
| 10.00 | 10. | Admissions Avoidance | | | |
| 10.30 | 11. | Quality Assurance Committee Chair Report 18 December 2019 | QA Chair | Report | QA Chair to provide a summary of assurance from the QA Committee escalate any items of concern to the Board |

| <i>Time</i> | | <i>Topic</i> | <i>Lead</i> | <i>Process</i> | <i>Expected Outcome</i> |
|---|-----|--|-------------|----------------|---|
| 10.40 | 12 | Finance and Investment Committee Chair Report 17 December 2019 | F&I Chair | Report | To provide a summary of assurance from the F&I Committee and escalate any items of concern |
| | | | | | |
| 10.50 | 13. | Any other business | | | |
| Questions from Members of the Public | | | | | |
| | 14. | To respond to any questions from members of the public that had been received in writing 24 hours in advance of the meeting. | | | |
| Resolution to Exclude the Press and Public | | | | | |
| | | To consider a resolution to exclude the press and public from the remainder of the meeting because publicity would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted | | | |

Meeting Board of Directors Meeting – Part One
Time 09.00
Date 28 November 2019
Venue Boardroom RBH

Present:-

| | | |
|-----------------------|--|-----|
| Mrs D Hall | Chair | DW |
| Mrs T Armstrong-Child | Director of Nursing/Deputy Chief Executive | TAC |
| Dr F Andrews | Medical Director | FA |
| Dr M Brown | Non-Executive Director | MB |
| Mr A Ennis | Chief Operating Officer | AE |
| Ms B Ismail | Non-Executive Director | BI |
| Mrs S Martin | Director of Strategic Transformation | SM |
| Mr J Mawrey | Director of Workforce | JM |
| Mrs J Njoroge | Non-Executive Director | JN |
| Mr M North | Non-Executive Director | MN |
| Mr A Stuttard | Non-Executive Director | AS |
| Mr A Thornton | Non-Executive Director | AT |
| Mrs A Walker | Director of Finance | AW |

In attendance: -

| | | |
|-------------|-----------------|----|
| Mrs E Steel | Trust Secretary | ES |
| Ms R Ganz | Associate NED | RG |

Apologies Dr J Bene

Declarations of Interest

| | |
|-------------|------------------------------|
| Mrs E Steel | Company Secretary iFM Bolton |
| Ms R Ganz | NED iFM Bolton |

Patient Story

Kerry Lyons – Admiral Nurse attended Board to provide an overview of the support offered to patients living with dementia and their carers and the support and training provided to Trust staff. The support for patients and their carers includes an education and support programme to give carers time for self, a weekly staff clinic to support staff who are caring for someone with dementia and a Music and Memories group for people living with dementia and their carers to get together and enjoy the benefits of music.

Board members discussed the benefits these interventions and others aimed at

patients with dementia were bringing including avoiding admissions through A&E, reduced expenditure on agency nurses to provide enhanced care and improved quality of life and safety for patients and carers.

In response to a question on what would make the service even better, Kerry advised that at present, although newly diagnosed patients get support after their diagnosis this is only for a defined period after which for some patients, there appears to be a gap when people muddle through until they hit a crisis.

Resolved: The Board thanked Kerry for her presentation and for her work to support patients and carers.

FT/19/75 Follow up report on dementia care and closing the gap to be included within next dementia update to the QA Committee

The Chair welcomed attendees and observers and reminded those present that it was Trish Armstrong-Child's last Board meeting before leaving the Trust to take up her promotion with Southport and Ormskirk NHS Trust. Trish was thanked for all her work for the organisation, for being the voice of reason and for providing inspirational and authentic leadership to all.

Trish responded by thanking the Board for giving her the opportunity to be the best possible version of herself.

4. Minutes of The Board Of Directors Meetings held 31 October 2019

The minutes of the meetings held on 31 October 2019 were approved as a true and accurate reflection of the meeting.

5. Action Sheet

The action sheet was updated to reflect progress made to discharge the agreed actions.

6. Matters Arising

There were no matters arising.

7. Chief Executive report

The Deputy Chief Executive presented the CEO report providing a summary of reportable incidents, awards, recognition and media interest.

With reference to the information provided on winter pressures, a question was asked about the uptake of flu vaccination. The Director of Nursing advised that the Trust communications team had created and led a very strong campaign to promote vaccination and she had confidence that uptake had been good. The Chair advised that she had visited the paediatric unit on the previous day and

seen first-hand a number of children with flu which raised the question about rates of vaccination uptake within the general public. (response to be provided)

Board Assurance Framework

The Director of Strategic Transformation advised that the risk relating to the GM partnership is about the specialist care programme and the potential impact on services within Bolton as decisions about future service delivery for the GM footprint are made.

Ms Ganz advised that at the Audit Committee a question had been raised with regard to risk appetite, specifically in relation to being a great place to work but also for all objectives. The Trust Secretary proposed allocating time in the part two January meeting to review risk appetite for all strategic objectives.

Resolved: the board noted the CEO update.

FT/19/76 respond to request for data on rates of public vaccination

FT/19/77 Review of risk appetite

8. Quality Assurance Committee Chair Report

Mr Thornton, the NED Chair of the Quality Assurance Committee presented his report from the meeting held on 20 November 2019 and highlighted the following areas from within the written report:

- The patient story telling how teams from across the Trust pulled together to organise a wedding for an end of life patient provided a strong example of the great care provided within the Trust.
- The report from the Clinical Governance Committee provided assurance on a number of areas – IT issues flagged in the antenatal screening review update are being addressed.
- The quarterly division reports continue to provide great depth of detail on the achievements and challenges of the divisions – they are available and recommended for all Board members to read.
- The six month update on BOSCA prompted a discussion on next steps; with a number of areas having reached gold and platinum standard the Director of Nursing advised that she would like to see the BOSCA accreditation system rolled out beyond the Trust to all areas of health and social care in Bolton.
- Falls performance remains below trajectory
- Risk Management Committee report highlighted issues with the fire risk survey and an estates issue with the structural integrity of a substation. Assurance was provided that mitigations are in place for these issues. iFM have taken a robust approach to assessing the Trust's infrastructure – this could in the short term lead to more issues being identified but is the right thing to do.

Resolved: The Board noted the report from the Chair of the Quality Assurance Committee

Finance and Investment Committee Chair Report

Mr Stuttard, the NED Chair of the Finance and Investment Committee presented his report from the meeting held on 26 November 2019. In the presentation and discussion of the report included within the Board pack, the following areas were noted:

- The CCG Director of Finance is now in attendance at these meetings to provide an update on the CCG position – this is a reciprocal arrangement with the Trust Director of Finance in attendance at the CCG meeting. He delivered an update on the CCG position – forecast break even and highlighted initiatives being considered to identify system savings.
- Month seven finance position excluding PSF is a deficit of £9m against a planned deficit of £3.7, however for the month of October the Trust returned a surplus of £0.1m.
- The main reasons for the continued shortfall remain: income shortfall, overspend on pay and underachievement of savings. These challenges were discussed in detail.
- The Committee received an update on the delivery of ICIP, although the Trust is forecasting delivery of the internal schemes the system schemes have not delivered. The system schemes will remain on the plan to be achieved through long term system transformation. Board members acknowledged the achievement of internal ICIP and asked that their formal thanks be extended to all divisions.
- In response to a question on the submission of reference costs information, the Director of Finance advised that the Trust were continuing to work with NHSI to provide this data which is important for comparison.
- In response to a question about cash balances, the Director of Finance advised that this may be more of a challenge going in to the next financial year.
- A question was raised about the capture of benefits associated with the implementation of EPR it was agreed that an update on the first three months should be provided in December.

Resolved: The Board noted the report from the Finance and Investment Committee. The Board supported the recommendation of to maintain the risk rating at 20.

FT/19/78

update on EPR implementation

10. Workforce Assurance Committee Chair report

In the absence of the Chief Executive, the Director of Workforce presented the Chair's reports from the Workforce Assurance Committee meeting held on 15 November 2019.

As recorded within the written summary of the meeting the Committee received a

number of reports for assurance including:

- Staff survey update – response rate anticipated to be around 40% - feedback from the Go Engage survey which will be shared with the Board in January should give an indication of results.
- The Committee discussed staff pledges and agreed that further engagement should be undertaken before finalising.
- Progress on job planning was noted with recognition that this is a long term complex project that has now been aligned to business cycles.
- The Committee received an update on the Obs and Gynae action plan, information on progress against the plan which has been delivered within the agreed timeframe is made available to HENW and the deanery.

In discussing the report from the Chair of the workforce Assurance Committee, board members noted the progress on recruitment and reducing agency spend and asked how this data triangulated with the overspend on pay costs. It was agreed that a report would be provided on workforce planning that would include triangulation of agency, pay and recruitment metrics.

Resolved: The Board noted the report from the Workforce Assurance Committee

FT/19/79 Proactive approach to update deanery on HENWE progress

FT/19/80 update on plan for Workforce of the future including triangulation of agency, pay and recruitment metrics

11. Audit Committee Chair Report

The Chair of the Audit Committee presented her written summary of the proceedings of the Audit Committee meeting held on 21 November 2019.

Overall good progress had been made on implementing recommendations from reports, these included actions identified within the Agency Use report which had now been downgraded to a medium risk report.

Exec leads attended to discuss the high risk reports on Security and cleaning – these reports had been escalated to the Board in October and had since been finalised. Although Committee members were concerned at the findings identified within the two reports they were assured that robust actions had been identified with appropriate oversight.

Board members commended the increased transparency within iFM Bolton and acknowledged the potential impact of increased risk/issue reports in the short term.

Resolved: The Board noted the report from the Chair of the Audit Committee

12 Urgent Care Delivery Board

The Chief Operating Officer presented the chair's report from the Urgent Care Delivery Board. The main focus of the meeting held on 12 November 2019 was

on four hour performance and national pressure to open more beds.

Board members discussed in detail, the deterioration of A&E performance, the challenge of pressures in the system and the plans to provide additional capacity both within the hospital bed base and within the community.

The Chief Operating Officer advised that performance had deteriorated in October with enormous pressures across the region and 1000 additional patients through the department in comparison to October 2018. These pressures had been compounded by the impact of EPR implementation slowing processes as staff became familiar with the new way of working.

Despite the pressures the investment in schemes to keep people out of hospital including admissions avoidance as discussed at the recent Governor meeting was having an impact. The number of ambulances attending with has reduced and the local authority have opened additional re-ablement beds however there are still a significant number of patients in hospital beds who are medically optimised and while they may still need care they do not need full hospital care.

Board members discussed the challenge of increased attendance from patients with relatively minor injuries and illnesses and potential actions to deflect these patients to primary care.

Board members asked for assurance that patients were kept safe and comfortable whilst waiting for assessment and treatment. The Director of Nursing advised that all patients were triaged on arrival with risk assessment and follow up observations of pressure areas, falls and nutrition depending on individual need.

Resolved: the board noted the Urgent Care Delivery Board Chair report, recognised the challenge and extended their thanks to all staff for the work done on a daily basis in difficult circumstances to care for patients.

13 **Integrated Performance Report**

Board members reviewed the Integrated Performance Report considering the metrics within the report and focusing on areas in response to questions and as directed by the executive team.

Resolved: the Board noted the integrated performance report

14 **EDI Annual Report**

Rahila Ahmed, the Trust Equality and Diversity lead attended to present the annual Equality and Diversity report providing an update on progress against agreed objectives and showcasing good practice on monitoring diversity and introducing practice to promote equity and inclusion.

Board members commended the depth and breadth of the report and the progress made and the planned actions to continue development in this area. It was agreed that the work could be further promoted through the publication of a summary document containing the key messages.

Resolved: the board noted the report and supported the recommendations included within the report.

FT/19/81

Comms to work with EDI to develop summary report of key messages for communication

15. Emergency Preparedness Resilience & Response (EPRR) Core Standards

The Chief Operating Officer presented the Annual EPRR report to inform Board members of the compliance with regard to the EPRR self-assessment and the action plan to ensure the Trust remains ready to respond to local, regional and national emergencies. The Chief Operating Officer commended Jimmy Tunn; the Trust's Head of Emergency Planning for his continued work to keep the Trust safe and prepared for all eventualities.

Resolved: The Board noted the annual EPRR report

16 Any other business

No other business

27. Questions from members of the public

Date and Time of Next Meeting

19 December 2019

November 28 2019 Board actions

| Code | Date | Context | Action | Who | Due | Comments |
|----------|------------|---------------------------------|--|-------|--------|--|
| FT/19/79 | 28/11/2019 | Workforce Assurance Committee | Proactive approach to update deanery on HENWE progress | JM/FA | Dec-19 | verbal update |
| FT/19/65 | 03/10/2019 | performance report | update on outpatient improvement plan including action to reduce DNA | SM | Dec-19 | agenda item |
| FT/19/78 | 28/11/2019 | F and I Report | update on EPR implementation | AE | Dec-19 | agenda item |
| FT/19/76 | 28/11/2019 | CEO report | respond to request for data on rates of public vaccination | MF/FA | Dec-19 | provided by email - action closed |
| FT/19/38 | 27/06/2019 | Seven Day services | Verbal update on benchmarking, written update in six months | FA | Jan-20 | |
| FT/19/70 | 31/10/2019 | Workforce Assurance Committee | GoEngage results to be presented to Board | JM | Jan-20 | |
| FT/19/64 | 03/10/2019 | performance report | Mortality update | FA | Jan-20 | |
| FT/19/67 | 03/10/2019 | Workforce strategy update | JM to share staff pledges with Board members | JM | Jan-20 | |
| FT/19/36 | 27/06/2019 | Urgent Care Board | System wide discussion/report on mental health including proactive approach | AE | Jan-20 | update on approach to mental health patients to January QA committee |
| FT/19/51 | 25/07/2019 | sustainability | update on work of the sustainability group | AE | Jan-20 | |
| FT/19/63 | 03/10/2019 | Urgent Care Board | update on system working | JB | Jan-20 | |
| FT/19/68 | 03/10/2019 | Workforce strategy update | WAC to undertake a focus on retention and report back thru Chair report | JM | Jan-20 | |
| FT/19/71 | 31/10/2019 | Urgent and Emergency Care Board | PEIP Committee to consider process for patient engagement and feedback in neighbourhood services | MF/SM | Jan-20 | |
| FT/19/73 | 31/10/2019 | performance report | update to QA committee on Breast waiting times | AE | Jan-20 | |
| FT/19/80 | 28/11/2019 | Workforce Assurance Committee | update on plan for Workforce of the future including triangulation of agency, pay and recruitment metrics | JM | Jan-20 | |
| FT/19/81 | 28/11/2019 | EDI report | Comms to work with EDI to develop summary report of key messages for communication | KS | Jan-20 | |
| FT/19/62 | 03/10/2019 | Shadow Board | Report through Workforce Assurance Committee on the Shadow Board programme | JM | Feb-20 | |
| FT/19/77 | 28/11/2019 | CEO report | Review of risk appetite | ES | Feb-20 | |
| FT/19/75 | 28/11/2019 | patient story - Admiral Nurse | Follow up report on dementia care and closing the gap to be included within next dementia update to the QA Committee | MF | Apr-20 | |
| FT/19/82 | 28/11/2019 | iFM business plan | Carbon Neutral strategy | AE | Jun-20 | |

Key

| | | | | |
|----------|-------------|-----|---------|---------|
| complete | agenda item | due | overdue | not due |
|----------|-------------|-----|---------|---------|

| | |
|------------------------|--------------------|
| Agenda Item No: | |
| Meeting: | Board of Directors |
| Date: | 28 November 2019 |

| | |
|---------------|------------------------|
| Title: | Chief Executive Report |
|---------------|------------------------|

| | |
|----------------|---|
| Purpose | <p>The Chief Executive update includes a summary of key issues since the previous Board meeting, including but not limited to:</p> <ul style="list-style-type: none"> • NHS Improvement update • Stakeholder update • Reportable issues log <ul style="list-style-type: none"> ○ Coroner communications ○ Never events ○ SIs ○ Red complaints |
|----------------|---|

| | |
|---------------------------|--|
| Executive Summary: | |
|---------------------------|--|

| | |
|----------------------------------|--|
| Previously considered by: | |
|----------------------------------|--|

| | | |
|--|--------------------------|----|
| Recommendation Please state if approval required or if for information | Provided for information | |
| | Confidential y/n | no |

This issue impacts on the following Trust ambitions (please ✓ & “RAG” rate relevant boxes)

| | | | |
|---|---|--|---|
| <i>To provide safe, high quality and compassionate care to every person every time</i> | ✓ | <i>Our Estate will be sustainable and developed in a way that supports staff and community Health and Wellbeing</i> | ✓ |
| <i>To be a great place to work, where all staff feel valued and can reach their full potential</i> | ✓ | <i>To integrate care to prevent ill health, improve wellbeing and meet the needs of the people of Bolton</i> | ✓ |
| <i>To continue to use our resources wisely so that we can invest in and improve our services</i> | ✓ | <i>To develop partnerships that will improve services and support education, research and innovation</i> | ✓ |

| | | |
|------------------------|-----------------------|------------------------|
| Negative Impact | Neutral Impact | Positive Impact |
|------------------------|-----------------------|------------------------|

| | | | |
|---------------------|---------------------------------|----------------------|------------------------------|
| Prepared by: | Esther Steel Trust Secretary | Presented by: | Dr J Bene Chief Executive |
|---------------------|---------------------------------|----------------------|------------------------------|

1. Awards and recognition

Internal

Employee of the Month – Wendy Partington – Weekend receptionist for her work to raise money for the Trust's Charitable Fund

Team of the Month – Maternity Ultrasound – for consistent management of increased workloads to secure good outcomes for parents and reduce the still birth rate.

2. News and Developments

The period of Purdah for the General Election limited the publication of any significant national news/development of relevance for this report – following the election we anticipate there will be a Queen's speech and an update on any implications for the NHS will be included in my next report

2.1 The Bolton Family

We are proud to play our part in the Bolton Family a group of more than 40 public, private and voluntary sector organisations working together to help deliver Bolton's 2030 vision, ensuring Bolton has a stronger community in which people feel safe, welcomed and connected. The work of the Bolton Family is estimated to have directly benefitted more than 10,000 people in Bolton with another 30,000 people experiencing the knock-on benefits. The proceeds from the sponsored walk which will now become an annual event were donated to our charitable fund.

BOLTON FAMILY FACTS 2019

80 CHILDREN
ATTENDED THE
SEDDY
BEARS PICNIC 

1,500 FAMILIES
PROVIDED WITH
CHRISTMAS
HAMPERS 

1 TONNE
OF FOOD &
26 VOLUNTEERS
COLLECTED FOR THE
LOCAL FOOD BANK 

10K WALK TO
RAISE 
£5,000 
FOR DEMENTIA CARE

30,000
PACKED
LUNCHES 
PROVIDED FOR
CHILDREN IN BOLTON
OVER SUMMER

HELPED TO DONATE
1,000
TOYS
AS PART OF BOLTON
LIONS TOY APPEAL 

38,000
TREES 
PLANTED IN 2019

3.0 Reportable Issues Log

Issues occurring between 20/11/19 and 12/12/19

3.1 **Serious Incidents and Never events**

No new serious incidents or never events reported

3.2 **Red Complaints –**

No red complaints reported at the time of writing

3.3 **Regulation 28 Reports – no new concerns from coroner reports**

3.4 Whistleblowing

No concerns to escalate to board

3.5 Media Coverage

The main media coverage since the last Board meeting was about pressures at A and E. This was picked up by local and national print and broadcast

An appeal for knitted hats for new-borns was covered by the Bolton News and reached over 400,000 people via social media.

A poem thanking staff in Women's Healthcare was covered by the Bolton News and picked up by NHSE and I.

Other coverage included the Endoscopy JAG accreditation, a party held by nurses for parents of NICU babies, and the Maternity pantomime.

4 Board Assurance Framework

The full Board Assurance Framework (BAF) is used to record and report the risks to the achievement of the Trust's strategic objectives, the controls to reduce or mitigate these risks, any identified gaps in these controls and the assurance that the controls are effective.

The BAF has been reviewed to align with the new five year strategy; comments are welcome on how the risks to our new ambitions are reflected within the BAF

The full BAF was reviewed in detail within the November Audit Committee; changes since the November Board are shown in red.

| Ambition | Lead | I | L | Dec | Nov | Key Risks/issues | Key actions | Oversight |
|--|------|---|---|-----|-----|--|--|--|
| To give every person the best treatment every time – reducing deaths in hospital | FA | | | | | Prompt identification and escalation of ill patients Increase in HSMR/RAMI | Ensure learning points are captured by Learning from deaths committee and that assurance fed back Ensure KPIS for E-obs/NEWS are agreed and monitored for improvement Ensure learning from deaths committee looks at diagnostic groups with greater than expected deaths using SJRs End of life strategy role out including education on identifying patients who are nearing end of life Development of a robust Quality Improvement approach make the best use of internal and external mortality intelligence Commission PwC to review Learning from Deaths processes, and share best practice observed in other clients Finalise Learning from Deaths Policy | QA committee Mortality Reduction Group Learning from Deaths |
| To give every person the best treatment every time – Delivery of Operational Performance | AE | | | | | Urgent Care pressure and increased demand on Diagnostic and Elective work Late decisions in A/E Beds coming up late Lower discharges at weekends Staffing in key departments Changes in pension rules | Urgent Care programme plan SAFER ECIP support Enhanced pathways as part of the new streaming model | Urgent care prog board System Sustainability Board |
| To be a great place to work | JM | | | | | Recruitment, limited pool of staff Pensions / Tax implications Sickness rates Reliance on Non-Core Staff – Premium spend (Agency) | Recruitment workplan in place Reviewing options to mitigate pension/tax implications Targeted actions to reduce sickness absence Tight focus on controls of Agency staff | IPM Workforce committee |
| To use our spend our money wisely Financial sustainability | AW | | | | | Delivery of ICIPs In year cost pressures Agency cost pressures Income/contracting risk Commissioning decisions Transformation funding Cash flow iFM performance System wide savings PSF risk | PMO and ICIP escalation meetings IPM meetings Integrated Care partnership development Actions to address agency pressures PBR/income review Develop links with specialist commissioners Development of joint budgets within local system Review of costs and income (patient level costing) iFM development including strategy and business plan System wide savings governance | F&I committee Board IPM Transformation Board ICIP escalation |
| To make our hospital and our buildings fit for the future | AW | | | | | Availability of capital funding Changes to capital regime Technical accounting rules (IFRS 16) consequences Lack of revenue to support capital Planning considerations – traffic and car parking constraints Clarity of Improving Specialist Care/Healthier Together Backlog maintenance | Development of detailed Business Cases Detailed Estates Strategy Working with LA and other partners Capital process to ensure correct prioritisation | Strategic Estates Board Strategic Estates Group Finance Committee |




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|---|-------|--|--|---|---|----|----|--|--|--|
| To join up services to improve the health of the people of Bolton | SM | | | 4 | 3 | 12 | 12 | Failure to Deliver Integrated Care Partnership | <p>Locality Plan to be produced November 2019</p> <p>Business Case for ICP to be developed December to include:-</p> <ul style="list-style-type: none"> Identify target population Define core elements of delivery model Translate the core elements to activity Identify and model the workforce requirements Model the financial requirement <p>Robust Communication and Engagement Plan across all providers in place</p> <p>Development of an OD Framework to support cultural change</p> <p>Development of a system approach to community engagement.</p> | <p>Strategy / Transformation Board</p> <p>QA</p> <p>Board</p> |
| To develop partnerships across Greater Manchester to improve services | JB/SM | | | 4 | 4 | 16 | 16 | Delivery of Healthier together/Improving Specialist Care | <p>Executive Provider Oversight Group overseeing implementation of Healthier Together</p> <p>NW Sector Partnership Board in place to oversee the delivery of the outputs of the Improving Specialist Care programme.</p> <p>Robust Programme Plan in place across GM for the delivery of the Improving Specialist Care Programme.</p> <p>Executive Level involvement in the Improving Specialist Care Programme.</p> | <p>Strategy / Transformation Board</p> <p>QA</p> <p>F and I</p> <p>Board</p> |

Committee/Group Chair's Report

(Version 2.0 August 2018, Review: July 2020)

| | | | |
|--------------------------|---|--------------------------|-----------------------|
| Name of Committee/Group: | Urgent Care Board | Report to: | Bolton FT Trust Board |
| Date of Meeting: | 10/12/19 | Date of next meeting: | 19/1/20 |
| Chair: | Su Long | Parent Committee: | |
| Members Present: | Andy Ennis Chrisella Morgan Jo Street from FT | Quorate (Yes/No): | Y |
| | | Key Members not present: | |

| Key Agenda Items: | RAG | Lead | Key Points | Action/decision |
|-------------------------------------|-----|---|--|--|
| System Pressures | R | | <ul style="list-style-type: none"> Noted the Business Continuity Incident and recovery Volume of attendances increasing Pressure related to Bed and has been growing since September Prediction for January require further bed capacity | <ul style="list-style-type: none"> Review streaming options Options to reduce requirements for beds considered and to be implemented eg more capacity in community |
| High impact changes | | <ul style="list-style-type: none"> Jo Bolger | <ul style="list-style-type: none"> Report received on the outcomes of changes Some evidence of improvements but opportunity for further benefits | <ul style="list-style-type: none"> Continue to drive changes and monitor |
| Performance Dashboard | | | <ul style="list-style-type: none"> Strong evidence of improvements for community based admission avoidance schemes Bed occupancy higher than anticipated | <ul style="list-style-type: none"> Continue to review |
| Dementia High needs capacity review | | <ul style="list-style-type: none"> CCG | <ul style="list-style-type: none"> Review suggests we have capacity to meet need But process for patients is slow and results in delays for transfer | <ul style="list-style-type: none"> Review pathways |
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| Comments | | | | |




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|--|--|
|  | No assurance – could have a significant impact on quality, operational or financial performance; |
|  | Moderate assurance – potential moderate impact on quality, operational or financial performance |
|  | Assured – no or minor impact on quality, operational or financial performance |

Please complete to highlight the key discussion points of the meeting using the key to identify the level of assurance/risk to the Trust

Committee/Group Chair's Report

Risks escalated

- Streaming – CEO FT and CO of CCG
- Community capacity - Jan 2020

| | |
|--|--|
|  | No assurance – could have a significant impact on quality, operational or financial performance; |
|  | Moderate assurance – potential moderate impact on quality, operational or financial performance |
|  | Assured – no or minor impact on quality, operational or financial performance |

Please complete to highlight the key discussion points of the meeting using the key to identify the level of assurance/risk to the Trust

Committee/Group Chair's Report

(Version 2.0 August 2018, Review: July 2020)

| | | | |
|--------------------------|--|--------------------------|---|
| Name of Committee/Group: | Finance & Investment Committee | Report to: | Board of Directors |
| Date of Meeting: | 17 th December 2019 | Date of next meeting: | 28 th January 2019 |
| Chair: | Alan Stuttard | Parent Committee: | Board of Directors |
| Members Present: | Bilkis Ismail, Andy Chilton, Catherine Hulme, Lesley Wallace | Quorate (Yes/No): | No |
| | | Key Members not present: | Jackie Bene, Mark Costello, Andy Ennis, Donna Hall, Sharon Martin, Martin North, Annette Walker |

| Key Agenda Items: | RAG | Lead | Key Points | Action/decision |
|------------------------|-----|----------------------------|--|-----------------|
| Month 8 Finance Report | | Deputy Director of Finance | <p>The financial position to the end of November 2019 (Month 8), excluding PSF, is a deficit of £9.4m, against a deficit plan of £3.7m, an overall shortfall of £5.7m. Taking PSF into account the deficit is £5.2m which is £5.1m off plan. The main reasons for the shortfall are:</p> <ul style="list-style-type: none"> Income shortfall of £1.6m Expenditure overspend of £3.5m ICIP off track by £1.3m <p>With regard to income the reported shortfall includes the system savings which have not been achieved to date of £4.0m. Therefore the underlying position with regard to contractual income and other income does show a surplus of £2.4m but this is primarily related to pass through costs which have no benefit to the Trust bottom line. The Committee were also provided with a detailed analysis of activity which in summary shows that A&E activity is up by circa 10% against plan whereas day case and elective activity is down against plan by circa 9%. Outpatient follow up attendances are down by circa 2% but outpatient procedures are up by circa 7%. What this indicates is a need to fully understand the capacity within the Trust and whether there is a requirement to adjust the plans for future years.</p> <p>Pay is overspent by £4.7m although variable pay is lower and agency expenditure is at its lowest level than at any time in the last three years and over the last two months is below both the internal and the NHSI targets.</p> | For noting. |

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| | No assurance – could have a significant impact on quality, operational or financial performance; |
| | Moderate assurance – potential moderate impact on quality, operational or financial performance |
| | Assured – no or minor impact on quality, operational or financial performance |

Please complete to highlight the key discussion points of the meeting using the key to identify the level of assurance/risk to the Trust

Committee/Group Chair's Report




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| Month 8 Finance Report (continued) | | | <p>Overall non-pay is in balance.</p> <p>As previously reported on the ICIP the internal target of £9.5m is on track to be delivered with the main issue being the system savings.</p> <p>With regard to capital the Trust is on target to achieve the plan of £11.9m. The cash position at the end of November is £17.1m which is above the plan by £5.6m. Aged debt over 121 days has significantly reduced and now stands at circa £1.1m compared to £3.5m at the end of September. However aged creditors over 121 days are £3.1m and when these are paid that will reduce the cash balance.</p> <p>Overall the financial position over the last three months, whilst still in deficit, has shown an improvement in the run rate. The Trust is still forecasting a mid case scenario of a deficit of £13.5m before PSF with a deficit of £5.9m once PSF has been applied. The year end cash position is currently a forecast of £11.7m.</p> | |
| ICIP Progress Update | <p>Internal</p> <p>System</p> | Deputy Director of Finance | The Committee received an update on the delivery of the ICIP. The Trust is forecasting delivery of the internal Divisional schemes of £9.5m. However the main risk remains around the delivery of the system wide savings. | For noting. |
| Financial Plan Initial Submission | | Head of Financial Services | The Trust along with all other NHS organisations was required to prepare and submit a 5 year Long Term Plan (LTP) to NHSI in November 2019. The LTP shows that the Trust will have a deficit of circa £13.6m in 2020/21 based on the current planning assumptions. This includes achieving efficiencies of 1.6% per annum. The plan shows a slight reduction in the deficit over the 5 year period. However at this stage these are very early estimates and a number of the assumptions will be subject to further scrutiny prior to the development of the detailed plan for 2020/21. | For noting. |

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Committee/Group Chair's Report

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| Accounting for Leases | N/A | Head of Financial Services | The Committee received an update on changes to the accounting for leases. From 1 st April 2020 all leases will be accounted for on the balance sheet whereas currently the majority are treated as revenue. The Trust is in the process of submitting details along with all other NHS organisations to NHSI to assess the impact. This matter has also been considered by the Audit Committee as it impacts on the accounting policies. | For noting. |
| SLAM Sprint Report | | Deputy Director of Finance | This report refers to a detailed review of the rules that produce the source data for the Trust's income system (SLAM). The aim is to ensure that the data between the CCG and the Trust is fully aligned and therefore reduces any risk of the data being interpreted differently. This is the second of three exercises that are being undertaken and the third one is scheduled for January. This will result in more accurate analysis of the income and could impact on the level of income due to the Trust. The full effect will be reported in due course once the final review is completed in January. | For noting. |
| iFM Finance Paper | | Director of Finance, iFM Bolton | The Committee received an update on the iFM financial position at Month 8. iFM are reporting a profit year to date of £277.0k which is adverse to the plan of £364.0k by £87.0k. Profit in month was £17.0k. iFM are forecasting an outturn profit of £580.0k against a plan of £545.0k. | For noting. |
| Committee Chair Reports | N/A | | <p>The Committee received Chair reports from:</p> <ul style="list-style-type: none"> • Capital and Revenue Investment Group • Contract & Performance Committee • Bolton System Finance & Savings Board <p>A query was raised in relation to one of the items on the CRIG report and explanations were sought regarding some of the approved items.</p> | For noting. |
| <p>Risks escalated</p> <p>There are no new risks to be escalated to the Board.</p> | | | | |

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