

Agenda item 2.a.ii

Report to:	Board of Directors	Date: 2 September 2021
Report from:	Chair of the Performance Committee	
Principal Objective/ Strategy and Title	GOVERNANCE: To update the Board of Directors on discussions at the Performance Committee meeting on 26th August 2021	
Board Assurance Framework Entries	678, 841, 1021, 1853, 1854, 2829, 2904	
Regulatory Requirement	Well Led/Code of Governance:	
Equality Considerations	None believed to apply	
Key Risks	To have clear and effective processes for assurance of Committee risks	
For:	Information	

1. Significant issues of interest to the Board

Surgery, Transplant & Anaesthetics Division presentation

The Committee received a presentation on theatres from Jane Speed, Operational Director and Cheryl Riotto, Head of Nursing, supported by David Jenkins, Clinical Director. There has been an increasing level of collaborative working across the Surgery, Transplant & Anaesthetics (STA) Division and other Divisions, as this is key to optimising theatre usage. There are regular weekly meetings which plan capacity six, four and two weeks in advance to ensure full optimisation. Additionally, the PTL (patient tracking list) meeting looks at waiting lists, ensuring that patients are treated based on clinical priority. There was a spotlight on the number of elective versus emergency procedures carried out over the past twelve months, with a comparison of cancellations as a percentage of elective activity. The most common reason for cancellation of procedures was a lack of critical care staff. In terms of transplant activity in the month, there were over 100 donor offers in July with six patients being transplanted – one heart, one single lung and four bilateral lung procedures. The Committee was reminded that the Royal Papworth carried out the highest number of cardiothoracic transplants in 2020-21, despite the Covid-19 pandemic, and the trust had the shortest waiting times for routine heart or lung transplants during 2019-20. This activity was all carried out against a backlog of vacancies in several areas – Surgical Care Practitioners, Operating Care Practitioners and others. Given that these positions are highly specialised and difficult to recruit and retain, the trust has started a “grow your own” scheme through training apprentice Operating Care Practitioners. The Committee thanked Jane and Cheryl for a most insightful presentation.

PIPR and Activity Restoration

All metrics in Caring remained green and Finance remained amber, while Safe changed from green to amber primarily due to the safe staffing fill rate for days reducing to 82.2%. People, Responsive, and Effective remained red. MS advised the committee that, following the recent establishment reviews, rostering templates would be examined closely with HR to ensure the data more accurately reflected reality.

While GP referrals in the month were significantly down against 2019/20, the consultant-to-consultant referrals were significantly improved, exceeding the target, along with non-admitted follow ups and CTs in Radiology. The picture by specialty has been mixed.

Finance and CIP

The committee noted the position for the year to date which was a surplus of £6.0m versus a planned surplus of £2.1m, largely driven by the income earned through the Elective Recovery Fund. The Homecare backlog continues, due to staff absences and vacancies but, in the month, there was a net nil variance against plan.

The CIP programme has delivered £1.3m against a plan of £0.7m for the four months, principally due to the corporate pharmacy project. Overall, the CIP programme is rated amber since while the CIP pipeline was sufficient to deliver the plan, a significant portion of this pipeline is based on non-recurrent savings and more work is required by divisions to deliver the CIP plan.

Cybersecurity Update

The committee sought assurance on how critical security patches were deployed to computers across the trust, given the high volumes involved. The committee also sought assurance around when the SQL servers, now out of support, were being upgraded. AR advised that the patches were examined and the most critical deployed, based on relevance. The servers are to be upgraded imminently.

2. Key decisions or actions taken by the Performance Committee

None

3. Matters referred to other committees or individual Executives

Following on from discussions around the cash levels of the Trust and the performance against the Better Payments Practice Code, where payments across all suppliers was 72% by value (and 94% by volume) versus the 95% standard, the Committee referred the Better Payments Practice Policy to the next Audit Committee meeting for review.

4. Other items of note

None

5. Recommendation

The Board to note the contents of this report