

**Agenda item 4.i**

<b>Report to:</b>	<b>Board of Directors</b>	<b>Date: 6 April 2023</b>
<b>Report from:</b>	<b>Chair of the Performance Committee</b>	
<b>Principal Objective/ Strategy and Title</b>	<b>GOVERNANCE: To update the Board of Directors on discussions at the Performance Committee</b>	
<b>Board Assurance Framework Entries</b>	678, 1021, 2829, 2904, 2985, 3009, 3074, 3223, 3261	
<b>Regulatory Requirement</b>	Well Led/Code of Governance:	
<b>Equality Considerations</b>	None believed to apply	
<b>Key Risks</b>	To have clear and effective processes for assurance of Committee risks	
<b>For:</b>	Information	

**1. Significant issues of interest to the Board**

**AHPs presentation.** We had an excellent presentation by Pippa Hales which set out clearly the key challenges faced, especially around workforce resilience and stability, as well as some promising opportunities, including use of data, maximising their skillset, pre-admission patient optimisation and improving patient flow. The Committee noted her request for continuing support for integrating AHPs within the divisions.

**BAF.** The Committee recommended that one committee took ownership of the Industrial Action risk, although information would continue to be provided to other committees. Since the risk related to disruption to productivity, the Committee recommended – subject to Board approval – that it would be appropriate for Performance Committee to do so.

**PIPR.** PIPR remained red with no change from the previous two months.

The Committee expressed concern as to klebsiella and E coli infections and the increase in moderate harm incidents and escalated their concerns to Quality & Risk.

The Effective and Responsive parts of the report continue to demonstrate the pressure that the hospital is under. The theatre transformation programme continued to make progress and was on track despite the Industrial Action during the month. Industrial Action in March is however likely to lead to a 20% reduction in outpatients. The continuing decline in staff turnover is welcome, although it is not clear whether this will be a continuing trend.

**Elective activity recovery plan.** The Committee was pleased to see the new report presented by AB, which clearly sets out divisional targets and benchmarks identifying the activity gap by division and derived from the Operational Plan 2023/24, new metrics, which will be monitored on a regular basis and the key actions to deliver the

improvements. AB explained that the programme of recovery introduces three key changes:

- a range of activities will be coordinated under a single governance structure
- the introduction of a broader holistic approach to the hospital's operations
- weekly (rather than monthly) reporting which will allow for a more reactive approach, enabling intervention in real time.

The weekly data will be aggregated monthly for reporting to Performance Committee.

**Theatres recovery.** Monthly targets continue to be met with 4.5 theatres open despite industrial action in-month. 5 theatres were opened in recent days well ahead of the June target, but it remains to be seen whether this is sustainable. Junior doctor strikes this month will however mean that targets will not be met in March. Pleasingly the recruitment pipeline remains on track.

**Operational Plan 2023-24.** A material proportion of ERF funding is linked to meeting elective activity targets (108% of 19/20 activity) and therefore elective activity is likely to be the key financial risk. The RPH plan which is being submitted for Board approval proposes to break even, based on the "mid-case" target of achieving 98% of 19/20 elective activity, which would amount to a 5% improvement of 22/23, and making use of non-recurrent mitigations to reduce the resulting underlying deficit. These mitigations would still be required even if we achieve our upside case. The Committee was assured however that the division had set themselves more challenging targets averaging at 105% of 19/20 activity and would be monitored against the national 108% target. Further explanation will be provided to NEDs who were not able to attend the previous briefing.

## **2. Key decisions or actions taken by the Performance Committee**

None

## **3. Matters referred to other committees or individual Executives**

Klebsiella and E coli infections and the increase in moderate harm incidents escalated to Q&R.

## **4. Other items of note**

## **5. Recommendation**

The Board to note the contents of this report.