

Agenda item 4.i

Report to:	Board of Directors	Date: 31 October 2024
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 on 26 September and 31 October 2024	
Board Assurance Framework Entries	678, 1021, 2829, 2904, 2985, 3009, 3074, 3223, 3261	
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

Finance. There is a material capex underspend YTD (this is what causes Finance to slip into amber on PIPR), so spend will be re-prioritised to ensure that we meet capex target. At this stage, the Committee is not concerned that the target will not be met.

The Committee also received updates on Medium Term Financial Planning and the approach to 2025/26 operational planning. The Committee was assured by the granular and realistic approach being taken.

Assurance: good

Premium temporary staffing spend remains a concern. Committee acknowledged that the issues are complex and vary between divisions and staffing groups. SH and OM will revert to Committee next month with proposed plan and metrics. **Assurance: limited pending delivery.**

PIPR remained at amber in August and September with Finance moving back from green to amber as a result of the capital spend position. Effective and Responsive remain red.

Effective. While elective activity has been affected by increased emergency activity, there has been reduced CCA occupancy as a result of poor leave management over August and less effective case mix management in September. HM acknowledges the system weaknesses and reassured the Committee that measures are being taken to address the issues, with more formal senior oversight of consultant leave and proactive steps to manage case mix in theatres. On a more positive note, theatre utilisation remains high supported by effective flow through ERU beds which moved to 10 in September. **Assurance: limited pending delivery.**

TAVI. Increased TAVI activity has ensured that the backlog has not deteriorated but has not been sufficient to clear the backlog to enable RPH consistently to meet the 18-week performance standard (let alone any more demanding standard). The TAVI review is due to conclude shortly and will report back to the Committee next month. **Assurance: limited pending delivery.**

Responsive. Discussion focussed on the very concerning position regarding long-waiters, which increased to 70 this month. Although late referrals accounted for a significant number, 41 out of the 70 were due to delays once patients had been referred to RPH. HM explained that this was largely due to failings in basic PTL management of each patient (and not capacity). The numbers (around 750 patients per week) ought to be manageable by the existing team. The Committee welcomed HM's candour and requested further assurance in future data as to the position of the 52-week breaches (how long, if treatment booked etc.). There was one patient this month exceeding 65 weeks. **Assurance: limited pending delivery.**

CT reporting. Assessment of the options to ensure longer term sustainability of improvements will come to the Committee next month. **Assurance: medium.**

Patient flow. Given the disappointing results so far (e.g. re discharge), the Committee queried whether real progress was being made. HM reassured the Committee that the programme involves cultural/leadership change where real progress is being made, e.g. consultants are leading conversations around flow in a way that has not previously been the case, but it will take time to produce tangible results. **Assurance: limited pending delivery**

Oncology Deep Dive. The Committee received an impressive report which provides an honest assessment of the drivers ("myth busting") which provided assurance that RPH's Cancer Transformation Board is starting in the right place. The Committee looks forward to receiving further updates, including KPIs and metrics. **Assurance: limited pending delivery**

EPRR (emergency preparedness). The Committee noted that our own evaluation of full compliance had been downgraded to substantial compliance after ICS peer review, as a number of items, although in train, were not yet completed. HM will revert to the Committee next month with a timeline for achieving full compliance. **Assurance: medium.**

2. Key decisions or actions taken by the Performance Committee

The Committee approved the approach to Annual Operational Planning 2025/26

3. Matters referred to other committees or individual Executives

None

4. Other items of note

None

5. Recommendation

The Board to note the contents of this report.