

SOUTH EASTERN HEALTH & SOCIAL CARE TRUST

**Minutes of a meeting of the South Eastern HSC Trust
Finance & Performance Committee held on
Monday 25 February 2019 at 11.00am
in the Boardroom, Trust Headquarters, Ulster Hospital**

Present:	Mr M Mawhinney Mr N Brady	Non-Executive Director (Chairman) Non-Executive Director
In Attendance:	Mr N Guckian Mr J Patton Mr P Morgan Ms C Allam Ms E Hannaway Ms B Mongan Mr B Whittle Ms N Patterson Miss C Hughes	Director of Finance & Estates Non-Executive Director (via video conferencing facilities) Asst Director Financial Management Elective Care Manager (Item 6/19) Head of Performance & Information (Item 6/19) Director of Adult Services & Prison Healthcare Director of Children's Services and Social Work Director of Nursing, Primary Care & Older People Personal Assistant
Apologies:	Ms R Coulter	Director of Planning, Performance & Informatics

1/19	<u>Welcome</u>	Action
	Mr Mawhinney welcomed everyone to the meeting. He noted that apologies had been received from Mr McKenna, Trust Chairman, and Mr McCaughey, Chief Executive.	
2/19	<u>Conflict of Interest</u>	
	All present confirmed that they had no conflicts of interest.	
3/19	<u>Lisburn PCCC Update</u>	
	It was agreed that this item should be deferred to the next meeting.	
4/19	<u>Minutes of the Previous Meeting (26 November 2018)</u>	
	The minutes of the meeting held on 26 November 2018, which had been circulated with papers for the meeting, were approved.	

5/19 Matters Arising From The Previous Minutes**Action**

At Mr Mawhinney's request, discussion took place regarding items not included on the agenda:-

Business Cases : Macmillan Information Centre and Cancer Support and Macmillan Environmental Improvement (Garden) Cancer Support

Mr Guckian advised that Macmillan have provided funding which is approximately £1m less than the totality of the business cases. This gap will be funded with a mixture of Charitable and Public Funds. Approval has been received from the Charitable Trust Funds Committee to avail of £400k - £600k from the MacDermott Fund. The Department of Health (DoH) have been advised of these plans and they have indicated no issues with the proposals. A separate business case is not required as the funding level is below the delegated limit.

Outline Business Case – MRI Scanner, Downe Hospital

Mr Guckian advised that this Outline Business Case has been submitted to the DoH and a response is awaited.

6/19 Performance Management

Mr Mawhinney welcomed Ms Allam and Ms Hannaway to the meeting. Ms Hannaway advised that the topic of Elective Care is extremely wide and therefore it would be split between this meeting and the next one.

During a detailed presentation Ms Hannaway noted that the definition of Elective Care is "planned care" and generally results from a referral from a primary or community health professional. The Trust's Service & Budget Agreement is the annual document which outlines the activity to be delivered. It has been recognised that the targets set are unrealistic and a disincentive for staff and therefore this has been changed to performance improvement trajectories. She noted that the high level Performance Dashboard and Scorecard are presented at Trust Board.

Ms Allam presented details on the following areas:-

- Allied Health Professionals (AHPs) : This service is reliant on Waiting List Initiative funding which is non-recurrent. The performance currently achieved is the best in the region. However the service is very dependent on Agency and Locum staff and therefore may not be sustainable.

Action

There is a Service & Budget Agreement for Radiology. A review was carried out of demand and capacity and additional funding was approved. Due to this additional funding received at the end of September 2018, procurement took place for Radiology Services with the Independent Sector. This is non-recurrent funding and the arrangement will cease if funding is not confirmed for 2019/20. This funding has improved the position.

During discussion of the Radiology position, Ms Allam noted that a few years ago the Trust had achieved the 9 week target in every area however there have been many changes within the service since then and more complex tests are now performed which has increased demand.

Regarding Audiology, Ms Allam advised that the target is to have no patient waiting more than 26 weeks. In January 2019 the projected trajectory was 355 but the actual was 749 (people breaching). The reason behind this poor performance was that one of the Locum staff has left and it has not been possible to replace them.

- Cardiac Investigations : The target is that no patient should wait longer than 9weeks for investigation. The percentage waiting longer is 49.1% and due to the capacity issues the Trust has contracted with an Independent Sector provider.

Ms Allam noted the interdependency between Waiting List Initiative clinics and the increase in investigations being requested. She outlined the main challenges facing the Trust, ie increased demand; non-recurrent funding resulting in waiting list initiatives being stood down/reinstated; increased complexity of interventions and difficulties in recruiting staff.

During discussion Mr Brady and Mr Mawhinney sought clarity on the layout of the presentation graphs/information. It was agreed that this could be somewhat confusing and Ms Allam and Ms Hannaway agreed to review presentation for the next meeting.

CA/EH

In response to a query from Mr Mawhinney, Ms Allam advised that patient expectations are managed by Trust staff's awareness of capacity and bed complement and therefore try to not over schedule elective care. GPs are well aware of the Trust's difficulties and understand this position. Updated information is also provided on the Patient & Client Council website.

Mr Mawhinney thanked Ms Allam and Ms Hannaway for their presentations and they left the meeting.

Action

7/19 Finance Report : Month 10 (period ended 31 December 2018)

The Financial Report for the period ended 31 December 2018 (Month 10) had been circulated with papers for the meeting. Mr Guckian advised that the Month 10 report forecast a gap of £400k before achieving a breakeven position. Since the preparation of this report the Trust has received a top-up funding allocation for the resilience plan which has improved this position. There is also a possibility that identified expenditure from the Confidence & Supply funding could be introduced into the financial position. In response to a query Mr Guckian advised that all Confidence & Supply funding is ring fenced for specific projects and cannot be transferred into general funds. The funding which may be brought into the financial position would be any actions identified by the Project Leads which have been taken to progress projects, eg the use of overtime, and this can be detailed in an addendum to the Projects. During discussion it was noted that any Confidence & Supply slippage is lost to the system and returns to the Treasury.

In relation to the pay award, Mr Guckian advised that this is being actioned in Month 11 and it is anticipated that funding from DoH will be sufficient to fund this. Confirmation of this will be received later in the week.

In response to queries Mr Guckian outlined the robust forecasts provided by Divisional Accountants and his belief that a breakeven position could be achieved.

Mr Mawhinney asked if the EU Exit is likely to incur additional costs and Mr Guckian believed that this is not likely to have an impact on the Trust's budgets. PaLS are holding an additional 4 – 6 weeks stock and Senior Managers in Pharmacy, CSSD, Community Equipment, Laboratories and Theatres are reviewing if any additional stocks are required. This will be brought in as year-end stock or absorbed in 2019/20.

Mr Guckian circulated a paper on the MORE Savings Target 2018-19 (Medicines Optimisation Regional Efficiency). He noted that the Pharmacy savings target had been very challenging but switching to generic/biosimilar drugs within Gastroenterology, Rheumatology and Dermatology has been very successful. He commended everyone involved in this achievement.

Mr Guckian circulated a confidential draft paper entitled Financial Planning 2019-20. He noted that whilst the paper outlines a 2018/19 Recurring Deficit per the Trust Delivery Plan of £33m, and emerging pressures in 2019/20 of a further £9m, he stressed that this is not an indication of expenditure being out of control. Many of the issues detailed are regional or national in nature and have been outlined at Trust Board meetings. The savings requirement for next year outlines the non-recurrent nature of savings during 2018/19. This issue has been detailed to both the Health & Social Care Board and the DoH on a number of occasions.

Action

In response to queries Mr Guckian advised that Independent Fostering is the full-year effect of the 2018/19 costs/commitments. Children's Services have experienced an increase in costs across due to an increased number of children in care. This is a regional issue. Auto Enrolment is also a regional issue and will be a cost of £2m for 2018/19.

Mr Guckian advised that the draft paper will be finalised and presented at a future Trust Board.

8/19 Any Other Business

No additional items were raised.

9/19 Date of Next Meeting

It was agreed that the next meeting would take place on **Wednesday 29 May 2019 at 2.00pm.**