Thirteenth Meeting of the Performance and Finance Committee

Notes

Monday 11th December 2023

In Attendance:

Jim McCall	Non-Executive Director
Paul Corrigan	Non-Executive Director
Owen Harkin	Deputy Chief Executive / Director of Finance
Neil Martin	Director of Strategic Planning, Performance and ICT
Stevie Lennon	Assistant Director of Finance
Donna Mawhinney	Assistant Director of Finance
Nuala McAuley	Assistant Director of Finance
Sarah Williamson	Assistant Director of Strategic Planning and Performance Management
Gillian Traub	Director of Operations
Cathy Gillen	Business Manager, Acute Services
Matt Mallon	Service Manager, Radiology
Jill McBride	Personal Assistant (Minute Taker)

1.	No apologies noted.	
2.	**Conflicts of Interest** No conflicts of interest were noted.	
3.	**Draft Minutes of Meeting held 18 October 2023** Notes taken as an accurate record.	
4.	**Financial Position at 31 October 2023** Mr Harkin provided the Trust Board Financial Position Report for October 2023 as part of the papers for todays meeting in order to set the scene for discussion. It was noted that the financial position is challenged at the moment and Mr Harkin confirmed that there is a lot of work currently ongoing with Divisions.	
5.	**<u>Performance:</u>** *5.1 Cancer Services* Cathy Gillen, Business Manager for Acute Services presented on Cancer Services performance. Ms Gillen went through the demand and waiting times for Skin, Head	

	and Neck and Upper GI for April and November 2023. Ms Gillen advised that skin referrals continue to increase at a significant rate and the longest wait as at 3 December 2023 was 133 days. Ms Gillen advised that in terms of skin, one of the issues is the inequitable demand versus capacity. It was confirmed that there is currently a vacant Consultant post and it is unlikely that there will be additional funding in quarter 4. It was noted that in terms of Head and Neck the longest wait as at 3 December was 12 days and Ms Gillen advised of the request from the region for additional support. Short discussion took place around this request. With respect to lung statistics, Ms Gillian advised of the difficulties in obtaining a diagnosis and also noted the delays in Oncology when patients are transferred to Belfast Trust. Mr Corrigan queried the prioritisation process of the transfer of patients and Mr McMahan confirmed that the process is equitable and transparent. With respect to breast activity, it was noted there is approximately 20 patients transferred to Belfast Trust each week. A Breast Radiologist has recently been appointed in the Northern Trust and it is hope that this will ease the previous significant challenges. Mr McMahon confirmed that SPPG increased capacity in Belfast Trust to assist Southern Trust and Mr Corrigan queried the reasoning behind this. The current regional gap was noted as being the main reason behind this. Mr McCall thanked Ms Gillen for the excellent presentation and noted the issues around demand and inequity. Mr McCall also welcomed the regional examples provided. *5.2 Diagnostics* Matt Mallon, Services Manager for Radiology presented to the Committee on Radiology Services. The Committee were advised of the Radiology waiting times as at October 2023 and it was noted that they will deteriorate further if there is no funding provided for quarter 4. Mr Mallon advised of the 23/24 Radiology Modality SBA volumes versus demand and noted that the gap continues to grow with the exception of plain film as referral rates are dropping due to increased use of CT as the first choice diagnostic. Mr Mallon confirmed to the Committee the December 2023 Department of Health approximate calculation of gap from	

	2018/19 levels to demand at 2022/23 and it was acknowledged that this will continue to grow year on year. The total regional gap was noted to be £20,100,000. Mr Mallon provided an update on CT for 23-24 and advised that there is no capacity for any additional associated reporting activity through core staff. It was noted that in the absence of Waiting List Initiative funding for reporting a retraction to service budget agreement would lead to a loss of up to 1,500 elective patient's scans per month. Mr Mallon advised that Western Health and Social Care Trust and Belfast Health and Social Care Trust continue to receive longstanding regional waiting list initiative funding and they complete 250 scans per month for Northern Health and Social Care Trust. Mr Mallon confirmed to the Committee that this is the only elective CT activity provided for Northern Health and Social Care Trust patients. It was noted that the projected financial position for 23/24 is a deficit of £1.7m and this is due to the reliance of locums to address vacancies. Mr McCall thanked Mr Mallon for the very informative presentation that also highlighted the key concerns. He recognised that vacancy rates is an issue. Mr Corrigan queried how the 37% vacancy rate compares with other Trusts and Mr Mallon confirmed that it is a regional position. Mr Corrigan also thanked Mr Mallon for the descriptive presentation. Short discussion took place on the reliance of Independent Sector and Mr Corrigan queried if the Trust is confident that the standards are acceptable. Mr Mallon confirmed the Trust has a good rapport with colleagues from the Independent Sector, monthly reporting is provided and no clinical concerns were provided.	
6.	**Financial Planning Correspondence** Mr Harkin advised the Committee that Mrs Welsh had received a letter from the Permanent Secretary, Mr Peter May on 14 November 2023 outlining the Trust Financial Position and the disappointing shift in position. Mr Harkin confirmed that the Trust responded to this correspondence on 30 November 2023. Mr Harkin advised that correspondence was also received from Tracey McCaig on 29 November regarding the recovery planning process. This discussion was also	

	taken to PTEB the following week to seek a consensus on the ask and associated timeframes. Tracey McCaig advised that following this the process will be formalised. Mr Harkin confirmed that the Trust response set out what the Trust did and confirmed that it is unlikely that the Trust figure will be moving. Mr Harkin advised the Committee of some of the steps that the Trust has been taking, some of which have been to address absence and a scrutiny process has been put in place. It was also noted that there are plans in place to repurpose Delivering Value and monthly meetings will be put in place with all Directors involved. In terms of strengthening the Delivering Value Programme, letters have been issued to all budget holders and there has been a reset of the Regional Delivering Value Programme. Mr Harkin also outlined some of the other initiatives that are taking place such as the review of all domiciliary care packages along with a review of the enhanced care packages. Mr Harkin advised that there is currently a decision panel for High Cost Placements and the pilot of Retinue has recently commenced. Mr Harkin advised that the DoH has confirmed that the system as a whole is required to break even. Short discussion took place and Mr McCall acknowledged that domiciliary care has been growing and becoming more expensive. There was recognition from the Committee that a regional plan is required. In terms of activity level, Mr Corrigan queried what the Trust's statutory duty to provide is and Mr Martin advised that it is not a straight forward process and that some services have been commissioned and consideration has been given to activity that could be stood down with no impact. Mr Corrigan and Mr McCall recognised the hugely complex situation and there was recognition that an internal methodology is required.	
7.	**In-Year Scrutiny Process** Mr Harkin advised that a memo was issued to all Directors on 4th December 2023 with respect to Recruitment Scrutiny setting out the scrutiny processes required in Divisions and the role of the Central Scrutiny Committee who will meet once per week. Mr Harkin advised that the message is to reinforce control and grip and confirmed that it is for all temporary and permanent positions.	

8.	**Savings Plans Update** Mr Lennon provided an update on the Savings Plan by Division for 2023/24. The savings schemes were outlined along with the planned savings and also the areas were savings are unlikely to be achieved along with planned contingency measures. Mr Lennon advised that he is confident of the areas that can be delivered on albeit some will be challenging. Mr Corrigan queried that of the £18m deficit does that assume that the savings are achieved and if it is not achieved will that worsen the deficit. Mr Harkin confirmed that there will be a continued focus on each Division with a specific emphasis on delivering value to ensure that the savings are delivered on. Mr Harkin confirmed that there continues to be good work ongoing around Nurse Utilisation and Mr McCall queried if there are any particular areas of concern and Mental Health and Learning Disability was noted to be one of these.	
9.	**High Cost Placements Update** Ms Traub updated the Committee on High Cost Placements advising of the work that is currently being driven forward. Ms Traub spoke about Enhanced Care in our Hospitals, Enhanced Care in our Community and advised of the Trust workshop that took place on 29 November with the four large IS providers. Ms Traub advised that the final stage of the design will commence prior to Christmas 2023 and the Shared Decision Panel will, under delegated authority from Executive Team consider the case and make a decision regarding the discharge of a service user to a high cost placement. Mr McCall thanked Ms Traub for the reassuring presentation and the foresight into what may be a solution. There was also recognition that some the areas may be better delivered on a regional basis and there was recognition that the Northern Trust have areas where the geography is shared with other Trusts. Mr Corrigan also acknowledged that it is good to hear all of the forward thinking information and he also queried the current	

	numbers of High Cost Placements in Northern Trust. Ms Traub confirmed that there is currently 72 Mental Health High Cost Placements and 38 Bespoke Placements as at August 2023 and the numbers for Community Care are similar. In terms of enhanced care packages, Mr Corrigan queried if a service user ends up in hospital does the Trust have to continue to pay for the 1:1. It was confirmed that an assessment would take place when the service user is admitted to hospital and it should then cease at this stage. After short discussion Mr McCall advised that this illustrates that contractual agreements require modernisation. Ms Traub advised that she would like High Cost Placements to be tabled as a standing item going forward. Mr McCall recognised that it will be very useful to get this regular update.	**Ms Traub**
10.	**Delivering Value** *Review of Terms of Reference* Mr Harkin advised that he wishes to make Delivering Value a Corporate issue. Monthly meetings will be scheduled from February following SMT on a Tuesday.	
11.	**RBCs > 300k June 2023 – December 2023** All business cases with a value greater than £300k between June and December 2023 were noted.	
12.	**Any Other Business** Mr McCall acknowledged that this is Mr Corrigan's last Performance and Finance Committee meeting and thanks were portrayed for all contributions throughout his term. Mr Harkin also portrayed his thanks and best wishes to Mr Corrigan.	
13.	**Date of Next Meeting:** 20 February 2024, 2pm	