

Eighth Meeting of the Performance and Finance Committee

Notes

Wednesday 11th August 2021

Via Zoom

In Attendance:

Billy Graham	Non-Executive Director, Chair
Paul Corrigan	Non-Executive Director
Jim McCall	Non-Executive Director
Owen Harkin	Deputy Chief Executive / Director of Finance
Neil Martin	Director of Strategic Development & Business Services
Sarah Williamson	Assistant Director of Strategic Planning and Performance Management
Marjorie Crilly	Assistant Director of Finance
Nuala McAuley	Assistant Director of Finance
Margaret O'Hagan	Director of Surgery and Clinical Services
Cathy Gillen	Business Support Officer, Surgery
Pat McClelland	Cancer Services Manager
Jill McBride	Personal Assistant (Minute Taker)

1.	Apologies Wendy Magowan, Director of Operations David McMullan, Assistant Director of Finance	
2.	Conflicts of Interest No conflicts of interest were noted.	
3.	Draft Minutes of Meeting held 14th June 2021 The minutes of the meeting held on 14 th June 2021 were agreed as an accurate record of the meeting. Mr Graham asked for an update on CAMHS and the reporting mechanisms. Mr Martin advised that they had recently changed from EPEX to PARIS and a significant amount of work was required initially. Mr Martin advised that the Division are still not at the point of obtaining reliable reports but they are continuing to work through this with Informatics.	

	Mr Graham queried if this is unique to the Northern Trust and Mr Martin advised that yes, it was and some on-going training is required for the staff and this is currently being given. Mr Graham advised that it would be useful to have a further update on this at the next meeting in October. Workplan An updated workplan will be brought to the next meeting in October. An update on Meridian to be tabled at the October meeting.	Mr Martin Mr Martin / Mr Harkin Mr Harkin
4.	Performance Focus – Cancer Services Mr Graham welcomed Mrs O'Hagan, Director for Surgery and Clinical Services and who has overarching responsibility for Cancer Services joined today's meeting to present a current update on Cancer Services. Mrs O'Hagan advised that Cancer is presented by a number of different means, either through the Emergency Department, GP Referrals (red flag), GP Referral (urgent / routine) or through screening programmes. Mrs O'Hagan discussed the number of referrals by Trust and by Tumour Group between July 2020 – June 2021. Mr Corrigan commented on the huge volume of referrals into the NHSCT and queried if any of these procedures are carried out elsewhere. Mrs O'Hagan advised that most are carried out by NHSCT. It was also noted that a large percentage of Head and Neck treatments are carried out via the Northern Trust. Mr Corrigan queried if bowel cancer was included within the statistics for Lower GI and Mrs O'Hagan advised that yes, it was. At this point in the meeting Pat McClelland explained the differences between Upper GI and Lower GI. In terms of breast, Mr Graham recognised that the number of referrals received into the Northern Trust stands out compared to the rest of the region and Mrs O'Hagan acknowledged that that the Trust are very challenged by it and frustrated, operationally as there is currently is not the level of investment available that is required. Mrs O'Hagan also discussed the main pathway challenges in terms of demand versus capacity as well as access challenges whether this is through an outpatient appointment, diagnostic endoscopy or theatre. Tumour site challenges were also discussed and the actions taken by the Trust were also outlined by Mrs O'Hagan.	

	It was noted that going forward the Cancer Strategy for Northern Ireland has not yet been launched. Mrs O'Hagan advised that there is assumed recurrent investment for oncology and haematology stabilisation, it was also noted that Trust Cancer Reform Programme for MEM, SCS, WCF Divisions is currently sitting under Renewing Our Vision. Going forward, progress and performance monitoring will be via the Northern Trust Cancer Strategic Board, Trust Performance meetings and also through Divisional Accountability meetings. Mr Graham commented on the regional prioritisation and advised that he felt concerned that local Trust visibility would be lost sight of. Mr Graham also paid comment to the Cancer Recovery Plan and queried where the investment goes to. It was also noted that there is a concern with respect to the current capability of the system to cope with what is going on. Mrs O'Hagan advised that it was extremely astute of Mr Graham to recognise the current pressures on the system and she advised that the pandemic continues to cause huge amounts of concern. Mr Graham advised that this is possibly something that could be discussed further at Trust Board. Mr Graham and Mr Corrigan thanked Mrs O'Hagan and Mrs McClelland for the very informative, in depth presentation of a very difficult area. Mrs McClelland also paid thanks to the Mr Graham and Mr Corrigan and advised that whilst the demand has soared, she wanted to make it very clear that the patient always remains at the centre.	
5.	Financial Plan Update Mr Harkin provided an update on the financial plan and the potential financial gap for 2021 / 22. It was noted that the Trust core projected deficit for 2021 / 22 is £33m with the potential all-inclusive deficit for the same period being £62.2m. This includes the new MORE Pharmacy Savings target on £0.6m along the regional approach for Technical Issues of £5.8m, e.g. Clinical Excellence. Mr Harkin advised that at present it is very much 'moving feast' and the Trust is continuing to have talks regionally. There is currently an anticipated projected cost of £7 for No More Silos and there continues to be discussions ongoing	

	with respect to Phone First, with the projected cost being identified of £3.3m to continue for the remainder of the year. Mr Harkin advised that he would provide a further update on this at the next Trust Board meeting as there are currently concerns on the impact of the service. Mr Harkin provided a summary of the 2020 / 21 closing unfunded financial pressures it was noted that the total recurrent cost is £43,762. In terms of Transformation Projects, Mr Harkin advised that there is currently a gap of approximately £5m and at present it is not possible to produce a plan that would enable the Trust to breakeven. With respect to pay and price inflation, Mr Harkin advised that this is assumed to fully funded including AFC band 1 closure, funded non recurrent through Transformation in 2020/21. In terms of 2021/22 demography, Mr Harkin advised that the DoH are not planning to give any further funding in this area. It was also noted that there remains ongoing challenges for Clinical Excellence Awards and in terms of Looked After Children; there has been a significant and unprecedented growth in these numbers. In terms of High Cost Cases, HSCB colleagues have informed Trusts to include these within pressure lists and it was noted that this has resolved the LD cases but has left Children's and other Disability cases unfunded. Mr Harkin advised that in terms of Transformation, decisions will need to be taken regarding the level of funding available and which services to stand down. It was noted that there are a large number of areas where funding is less than costs and this includes MDT's. Mr Harkin explained that there appears to be significant gaps in areas of rebuild and these require further work, with the assumption being that areas not funded should end immediately, however this may cause mixed messages. In terms of next steps, there will be a complete costing review which will consider potential steps towards break even. It was also noted that a draft DOF Assessment is required to be presented to HSCB by 16 August and this will contain spend on earmarked areas as a first priority, identify areas for non-recurrent cost containment and set out steps on flexible staffing spend by Directorate. Mr Harkin advised that he would provide a further detailed update to Trust Board on 26 August 2021.	
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6.	Month 3 Financial Position Mr Harkin advised that a letter had been received on 4 August 2021 from Tracey McCaig, DOF, HSCB with respect to Information to Support October Monitoring Bids. The letter sets out what it would like from each Trust and it is set out as follows: • A projection of the in-year COVID-19 pressures for 2021/22. • A projection of the Trusts in year deficit excluding the COVID-19 projected expenditure. Marjorie Crilly advised that on receiving this correspondence she had scheduled a meeting with regional colleague's yesterday morning to discuss further. It was also noted that indicative allocations had been received back in May 2021 and to date £1.6m has been identified in BAU downturn savings through travel and training. Marjorie Crilly advised that she is currently trying to obtain a further £2.4m as other Trusts have identified £4m in savings and the Northern Trust have been asked to match this target. Marjorie Crilly also advised that she will be ensuring that Front Line Services are not affected by these savings. Mr Harkin advised that he will also provide a further update to the confidential section of the next Trust Board meeting.	
7.	Any Other Business Mr Corrigan asked for an update on the Urgent Care Centre and was advised by Mr Martin that this is currently being used for the Paediatric Ambulatory Service.	
8.	Date of Next Meeting Monday 11th October 2021, 2PM via Zoom	