

<b>Report Title</b>	NHS Regulatory Undertakings – monthly status update		
<b>Sponsoring Executive</b>	Toby Lewis, Chief Executive		
<b>Report Author</b>	Toby Lewis, Chief Executive		
<b>Meeting</b>	Public Trust Board	<b>Date</b>	5 <sup>th</sup> December 2019

### 1. Suggested discussion points *[two or three issues you consider the Trust Board should focus on]*

The usual monthly summary is provided. There is additional information on agency spend. The position has not deteriorated, with rise in pay spend being attributable to other lines. It remains possible to achieve our month 12 position and reviews are taking place to determine the route to a 2020-2021 cap compliant position which is embedded within CIPs.

The continued difficulties meeting our four hour trajectory are rehearsed elsewhere in the papers.

An update on the 2017 SI review will come to a forthcoming Q&S committee with a view to the item being closed.

### 2. Alignment to 2020 Vision *[indicate with an 'X' which Plan this paper supports]*

Safety Plan		Public Health Plan		People Plan & Education Plan	
Quality Plan		Research and Development		Estates Plan	
Financial Plan		Digital Plan		Other <i>[specify in the paper]</i>	X

### 3. Previous consideration *[where has this paper been previously discussed?]*

Monthly report to Board

### 4. Recommendation(s)

The Trust Board is asked to:

- a. DISCUSS** the credibility of plans to achieve two hour decision making in our EDs

### 5. Impact *[indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]*

Trust Risk Register		n/a				
Board Assurance Framework		n/a				
Equality Impact Assessment	Is this required?	Y		N	X	If 'Y' date completed
Quality Impact Assessment	Is this required?	Y		N	X	If 'Y' date completed

## NHS Improvement 2019-20 Undertakings Report: a monthly report to the Trust Board for information

Requirement	Last month's update	This month's update
<b>Operational Performance issues</b> Breach of A&E 4 hour waiting time since June 2016.	As promised November's Board will see routine updates. Triage times are recovering now to pre Unity levels. Our prior and now compounded issue remains the delay to decisions within ED. Actions to address that are outlined and timetabled in the appended annex.	Whilst internal and external analysis suggests that we have taken the listed and agreed actions, we are not seeing sufficient improvements in staged wait times within ED. Under the Chief Executive's report to the Board, this item is considered in more detail.
<b>Emergency Care</b> The Trust will take all reasonable steps to recover operational performance to meet its projected performance and achieve sustainable compliance with the 4 hour A&E standard in line with the Trust trajectory delivery 90% by September 2018 and 95% by March 2019.		
<b>Financial Issues</b> In 2016/7 the Trust reported a deficit (exc STF) of -£17.2m against a planned deficit of -£4.7m (the Trusts underlying deficit was -£26m).	An agreed income improvement plan has been developed and is being implemented with a dedicated "war room" in place within HQ including clinicians, managers and booking staff. FIC on January 2 <sup>nd</sup> can see data on outcomes from that work.	Really good progress has been made in November with income in surgical services. A review of the implications for 2020-2021 will take place on December 10 <sup>th</sup> .
<b>Agency Spend</b> The Trust delivered a significant reduction in its agency spend from spend of £23.3m in 2016/17 to £15.8m in 2017/18. However, this was still above the agency ceiling of £11m.	The attached annex shows some improvement. Progress on medical staff in medicine and emergency care is improving and will be reviewed in detail at the November Group Review	Analysis at Group Reviews showed improved control in managing medical agency spend. Whilst nursing agency spend has not deteriorated, there is less comfort that in the MEC group due grip is in place.
<b>Quality Improvement</b> The Trust will ensure the improvement plan to address the recommendations from the serious incident and Patient Safety review is implemented and	A review of SIs is with the Board today and an update on the specific actions from the 2017 review will be issued to the Q&S committee during Q3	The update last month remains extant.

Requirement	Last month's update	This month's update
delivered by a date to be agreed with NHS improvement.		
<b>Programme Management</b> The Trust will implement sufficient programme management and governance arrangements to enable delivery of these undertakings.	No change since last month's report	We are finalising plans to ensure that across the next step of our digital programme (unity phase X) and our implementation plan for Midland Met readiness we have the right resource and in the right place.
<b>Other Partner Stakeholders</b> The Trust will co-operate and work with any partner stakeholders who may be appointed by NHS improvement to assist the Trust with delivery of the Quality improvement Plan, Joint A&E improvement plan and the improvement of its finances and the quality of care the Trust provides.	No change since last month's report.	The Trust is notably active in STP wide activities and in particular is contributing to the variation analysis of emergency care within the UEC grouping.

Toby Lewis, Chief Executive  
November 1<sup>st</sup> 2019

# SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

Public Trust Board: 5<sup>th</sup> December 2019

## NHSI Undertakings - Agency Plan

Professional group	Planned position October	Actual October position	March 2020 planned exit rate	Month 12 Exit rate as of October 19	Comments
Overall	-1453	-1325	-1102	-1204	
<b>Medical Agency</b> including recruitment of substantive staff, LTS and STS reduction, rostering improvements.	-622	-595	-454	-635	Surgical services additional £70k of spend predicted to deliver production plan Roster improvements still to be made
<b>Nursing &amp; midwifery Agency</b> including recruitment of substantive staff, LTS & STS reduction, rostering improvements, reducing unlocking forms	-604	--519	-429	-391	External recruitment fairs Increased rostering compliance including reducing unlocking forms Reducing short term sickness Rostering improvements not being delivered Over allocation of A/L
<b>Admin and Clerical</b> Incl. grip & control, completing UNITY, recruitment to substantive staffing	-101	-75	-114	-67	Substantive recruits successful sooner than predicted. Informatics spend reducing
<b>AHP Agency</b> Recruitment of substantive staff, LTS & STS reduction	-119	-108	-105	-107	AHP agency reduction plans are working well and should exit the year on trajectory

## SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

Trust Board: 5<sup>th</sup> December 2019

### Vacancy Update

INDICATOR	SEPT 19	OCT 19	NOV 19
No. of vacant WTE in active recruitment	936	946	1089
No. not in advert at end of reporting period (2 day processing)	3	6	4
No. at advert on NHS jobs	50	57	47
No. at conditional offer stage	315	381	65
No at unconditional offer stage	568	502	973
No. withdrawn	21	25	19
No of New Starters	108	126	151
No of Leavers	64	68	69
No of new activity requests received in reporting period	58	89	182

### Projected New External Hires

By 31<sup>st</sup> December 2019            386

By 31<sup>st</sup> March 2020                627