Paper ref: TB (05/20) 014

Sandwell and West Birmingham Hospitals WHS



NHS Trust

Report Title	NHS Regulatory Undertakings – monthly status update				
Sponsoring Executive	Toby Lewis, Chief Executive				
Report Author	Toby Lewis, Chief Executive				
Meeting	Trust Board (Public) Date 7 th May 2020				

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

Since the Board last met, we have seen improvement in four hour performance and further deterioration in agency expenditure. Very little agency expenditure was reclaimed for Covid-19 (39k) and as such this suggests further spend beyond plan for other reasons. I have concluded, and will reflect in my Annual Governance Statement, that Group and Executive control over spend has fallen short of what is expected. Three recovery plans in 19-20 have failed. From May 5th central control will change to reflect either pre-agreed spend or ad-hoc spend.

It is unclear whether the fall in ED attendances will lessen or accelerate the work taking place on additional emergency care waiting time metrics. In developing our recovery plan we need to construct workforce and flow models which make it likely that a senior decision maker will see a patient inside an hour. We need to ensure that this is understood at Group level and a persuasive plan to that effect is established.

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	X	Research and Development		Estates Plan		
Financial Plan	X	Digital Plan		Other [specify in the paper]	Х	

Previous consideration [where has this paper been previously discussed?]

Monthly report to Board

4. Recommendation(s)

The Trust Board is asked to:

- **DISCUSS** work to achieve triage and assessment wait standards
- CONSIDER what assurances must be provided on agency controls from May 2020

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	ls	this required?	Υ	Z	Х	If 'Y' date completed
Quality Impact Assessment	ls	this required?	Υ	Z	Χ	If 'Y' date completed

SANDWELL AND WEST BIRMINGHAM NHS TRUST

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

Requirement	Last month's update	This month's update		
Operational Performance issues Breach of A&E 4 hour waiting time since June 2016.	The Trust is close to the regional wait time average performance MTD. This remains short of our 80% ambition or our 85% ambition. We cannot yet show Minors Performance at 98% and remain focused on that,	The SPC charts do now show improvements on one hour metrics. It is unclear whether that confirms capacity was the prior bottleneck and if so what the tipping point for that capacity is.		
Emergency Care 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.	alongside handover waits, which have grown in recent days. The SPC charts continue to show we are not reducing one hour waits to see a senior decision maker and we have identified peer sites to visit to understand better the micro work that they have done on flow. Our Ambulatory Majors project and AMAA improvement plan come to the executive on March 10 th for sign off and execution consideration.	The Board should confirm a deadline for the AMAA plan to be agreed within the Executive.		
Financial Issues 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).	Our January STP submission suggested a remaining income gap for the Trust of around £10m to need. Commissioner offers are not currently consistent with that plan and our whole STP team are working through how to address these issues.	Negotiation of 2020-21 contracts were suspended and the Trust balanced its 19-20 outturn to control total. The block arrangements for Q1+1month were previously advised. The risk gap between block income and plan is being calculated and will be orally advised.		
Agency Spend 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 actions listed last month remain extant. The Grip and Control model is in place from start of April against a plan to be finalised w/b 16-03.	We decided to defer the model from April 1 st owing to frontline manager pressure. It will commence from May 5 th and be fully effective from May 31 st .		
Quality Improvement The Trust will ensure the improvement	Compliant. We use SRM to seek sign off again.	SRM was not constituted to discuss this but we will seek to address the matter in NHSM quality catch up meeting.		

Requirement	Last month's update	This month's update
plan to address the recommendations from the serious incident and Patient Safety review is implemented and delivered by a date to be agreed with NHS improvement.		
Programme Management The Trust will implement sufficient programme management and governance arrangements to enable delivery of these undertakings.	As left.	As left
Other Partner Stakeholders 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.	Compliant.	Compliant, notwithstanding alterations being made at CCG and STP level pursuant to Covid-19.

Toby Lewis Chief Executive

7th May 2020