

<b>Performance Committee (PAC), Key Issues Report</b>	
<b>Report Date:</b> 24 September 2024	<b>Report of:</b> Performance Assurance Committee
<b>Date of meeting:</b> 24 September 2024	<b>Members</b> Rosi Edwards (Chair), Rajinder Dhaliwal, Sarah Dunnett, Inese Robotham, Sara Biffen, Lisa Mitchell, Simon Balderstone (part) Nigel Lee (part)
1	<p><b>Agenda</b></p> <p>The Committee considered the following:</p> <ul style="list-style-type: none"> <li>• Performance Highlights</li> <li>• Workforce Plan and Performance Impact</li> <li>• Strategy &amp; Partnership update</li> </ul>
2a	<p><b>Alert</b> <i>Matters of concerns, gaps in assurance or key risks to escalate to the Board</i></p> <ul style="list-style-type: none"> <li>• The difficulties with the data warehouse mean that SaTH lacks information on type of activity (no clinical coding data) and hence is unable to give an accurate picture of current levels of performance. This makes it hard to determine whether it is financially safe to commission extra capacity. A team of experts are working to identify the best way to resolve the problem.</li> <li>• PAC heard that while the number of over 65-week breaches are reducing, SaTH is not where it planned to be at this stage. The current trajectory is to reach zero by the end of November, but SaTH has been informed by NHSE that it needs to reach zero by the end of October. This will require additional resources, which will need to be balanced with the financial implications.</li> <li>• Cancer performance: in order to achieve the target of 70% of patients receiving treatment within 62 days, the backlog has to be cleared. Having previously been the most improved trust in terms of clearing the backlog, SaTH moved back into Tier 1, due to losing insourcing capacity at the start of the year. With insourcing resumed during June, the backlog is now reducing (eg: 18 September 482, 23 September 441).</li> <li>• There are a number of fragile services which may impact on RTT and cancer performance. All divisions are reviewing their workforce needs and looking at insourcing and outsourcing and productivity</li> </ul>
2b	<p><b>Assurance</b> <i>Positive assurances and highlights of note for the Board</i></p> <ul style="list-style-type: none"> <li>• NHSE support to help SaTH in ensuring its systems to manage its cancer services are optimised found that all its systems are well designed and functioning, and that the issue behind the backlog is lack of capacity.</li> <li>• Workforce: the reduction in whole time equivalents continues to be ahead of trajectory (down 55 in August), though the rate of reduction is slower than before. The permanent workforce has increased due to additional foundation year trainee doctors being placed on training programmes across the Trust, a higher</li> </ul>

		<p>promotion allocated to SaTH than we had planned. The benefit will be through supporting reductions in temporary staffing usage over the coming months.</p>		
2c	<p><b>Advise</b>  <i>Areas that continue to be reported on and/or where some assurance has been noted/further assurance sought.</i></p>	<ul style="list-style-type: none"> <li>• PAC heard that ensuring adequate staffing of theatres may be a challenge unless some flexibility is available, and this could impact theatre productivity.</li> <li>• Initial Assessment: Paediatric Test of Change week at RSH began on 16 September to trial the impact of a twilight shift following demand analysis.</li> <li>• This was the first meeting of PAC, with a very short agenda. PAC went through the minutes of the final Finance and Performance Committee to make sure any performance-related actions were identified and followed up. Future meetings will cover a wider range of topics in line with PAC's Terms of Reference.</li> </ul>		
2d	<p><b>Actions Significant follow up actions</b></p>	<ul style="list-style-type: none"> <li>• PAC will receive a detailed report and presentation at its next meeting on Urgent and Emergency Care Transformation - progress so far, outcomes, issues affecting performance. PAC will then seek further detail on those improvements which are within SaTH's control and those which depend on wider action within the system.</li> </ul>		
3	<p><b>Report compiled by</b></p>	<p><i>Rosi Edwards, Chair, Non-Executive Director</i></p>	<p><b>Minutes available from</b></p>	<p><i>Lisa Mitchell</i></p>