

Performance Assurance Committee, Key Issues Report					
Report Date: 22 October 2024 Date of meeting: 22 October 2024		Report of: Performance Assurance Committee (PAC) Members: Rosi Edwards (Chair), Sara Biffen, Ned Hobbs, Inese Robotham, Sarah Dunnett, Rajinder Dhaliwal, Simon Balderstone, Debbie Bryce (Part), Laura Graham (Part) & Lisa Mitchell			
2a	Alert Matters of concerns, gaps in assurance or key risks to escalate to the Board	 Electives performance: SaTH didn't achieve zero waiting over 65 weeks at the end of September (459 breaches) and there were 49 over 78-week breaches, the first for 12 months. For October, predictions are 20 over 78 weeks and 420 over 65 weeks. Getting to zero by early November is at risk due to the position in Head and Neck, where there are significant challenges in workforce and theatre availability, and where an independent provider signed up for in- and out-sourcing has declared they are unable to help in October. PAC heard that there are regional and national difficulties in this specialty and that the national team are seeking to help us through discussions with other private providers. There is no obvious short-term fix for this and a regional solution is needed. Urgent and emergency care remains a challenge. Following improvements in the summer months there have been deteriorations in 4 hour and 12-hour performance. Work is being done to understand why performance in minors is so slow compared with typical minor injuries units, through a test of change. Did not Attend (DNA) numbers have increased due to patients not getting notification of appointments in time due to booking difficulties arising from the change to Careflow. This is affecting SaTH's activity and income as well as patient care. SaTH are 			
2b	Assurance Positive assurances and highlights of note for the Board				

2c	Advise Areas that continue to be reported on and/or where some assurance	The elective orthopedic ward is due to open to patients in November, subject to the air changes being confirmed to be at the right level, enabling orthopedic surgery to resume. There will still be a need for some support from RJAH and the Royal Orthopedic hospital, but SaTH will be able to make greater progress in the advanced recovery programme.			
	has been noted/further assurance sought.	Data Warehouse (DWH): PAC received a verbal update on this. A report on the visit on 3 October by the national digital lead and 3 regional leads has determined that the roll-out of Careflow was done well and that the DWH failure was not caused by Careflow and that concentrating on getting the existing DWH working again was appropriate, along with working in parallel on a longer-term sustainable solution. National and regional help continues.			
		 Board Assurance Framework: PAC considered the updated BAF and confirmed the existing scores of BAF 6 (estates) and 10 (urgent and emergency care). It agreed to raise the risk score of 7b, (digital) from 16 to 20 not solely because of the problems with the data warehouse, but because of challenges with capacity and competence of the workforce. PAC asked for more detail to be included in the risk description on the achievements, the gaps, controls and actions. PAC will consider whether the score for risk 9 (post Covid recovery) should be raised at the next quarter review of the BAF. 			
		Use of agency nursing staff is due to end on 1 November 2024, but with provision being made to enable agency use to continue in theatres where necessary			
2d	Actions Significant follow up	Report at the November PAC to focus on DNAs and bookings. Penert on Fetates Strategy and report on the external review.			
	actions	 Report on Estates Strategy and report on the external review of estates' management of contracts to come to the November meeting 			
3	Report compiled by	Rosi Edwards, Chair/Non-Executive Director	Minutes availablefrom	Lisa Mitchell	