

CHAIR'S LOG: Chair's Key Issues and Assurance Model

Committee/Group: Resources Committee	Date: 21 January 2020	Chair: Jennie Adams
--------------------------------------	-----------------------	---------------------

Agenda Item	Issue and Lead Officer	Receiving Body, i.e. Board or Committee	For Recommendation or Assurance to the receiving body
8. Finance Report	<p>Finance Director – Escalate the financial concerns regarding achievement of Q4 PSF and the need to inform NHSI/E of a possible £4m deficit.</p> <p>Committee explored the reasons for the Q4 deterioration, the assumptions made in the current projection and risks and mitigations around this outcome. Committee recognised the need for notification of NHSI regarding potential CT breach. There was some reassurance taken from the positive dialogue that has been achieved with regulators and their supportive attitude and actions. The committee felt that there was potential additional risk to current projections from growing safety concerns raised by CQC in their latest visit and from our own internal intelligence. CiP programme is on track but slippage on Care Group delivery and lack of transformational schemes going forward is a concern. Committee continues to press for evidence that GIRFT and Model Hospital work is delivering savings.</p>	Board	<p>Assurance:</p> <ol style="list-style-type: none"> 1. Achievement of Q3 target and PSF 2. Trust has not lost grip and control of finances 3. Further mitigations may still be able to retrieve the position by year end. <p>Recommendation:</p> <ol style="list-style-type: none"> 1. Finance risks on BAF and CRR are reviewed/increased. 2. Board to consider what level of risk it can tolerate on further emerging patient safety issues in Q4.
8. Finance Report	<p>Finance Director – Risk around the capital programme for the current year, 2020/21 and beyond.</p> <p>The current and predicted cash flow position combined with known spending commitments leaves the Trust with very modest resources for backlog maintenance and IT spending. The committee was concerned that there are unknown and potentially significant risks that will emerge when the latest estate condition survey reveals the scale and seriousness of backlog maintenance. Current I&E squeeze is starting to impact on this year's capital spend due to cash shortages</p>	Board	<p>Recommendation:</p> <p>Board to consider the pace of this work and discuss spending priorities in light of the capital squeeze.</p> <p>Assurance: This represents a gap in assurance and an unknown risk</p>

	– impacting IT projects and maintenance.		
Action Log	HPV Business Case – Need further assurance that decant facilities have been identified at both York and Scarborough.	Board	Assurance: Gap in assurance around Trust ability to deploy the new equipment in a timely way. Update from DIPC requested in light of c-diff position.
10. Digital	Chair – concern around slippage on key IT projects (e.g. Community mobile working, Windows 10 migration). This is due to combination of capex slowdown and the lack of IT staff to progress projects as the same staff are being used for multiple projects. Committee felt that the plethora of projects were not always prioritised on basis of maximising benefit to Trust service and finances – which was essential given the lack of resource and staff. Some culture challenges persist in adoption of new ways of working – e.g. staff driving to sustainability meetings rather than using Webex.	Board	<p>Recommendation:</p> <ol style="list-style-type: none"> 1. Board to consider prioritisation of IT spend on basis of robust cost/benefit analysis. 2. Board to promote sustainable culture. <p>Assurance:</p> <ol style="list-style-type: none"> 1. More transparency on digital agenda via monthly report. 2. Digital Steering Group first meeting this month.
5. BAF	FT Secretary – discussion about the impact of the CQC visits on the BAF Quality/Patient Safety scores	Quality Committee	
	FT Secretary - CNST Premium increase and how learning from claims is being sought.	Quality Committee	

CHAIR'S LOG: Chair's Key Issues and Assurance Model

Committee/Group: Quality Committee	Date: 21 January 2020	Chair: Lorraine Boyd
------------------------------------	-----------------------	----------------------

Agenda Item	Issue and Lead Officer	Receiving Body, i.e. Board or Committee	For Recommendation or Assurance to the receiving body
7. Committee Assurance	Chair - Discussion on how to rationalise the work of this Committee to make it more efficient, focussed and effective revealed continued lack of clarity around how Ward to Board governance will be delivered in practice. The need to get this right was acknowledged. It was felt that a wider Board discussion is needed including consideration of the need for external expert assistance to review/redesign the governance structure.	Board	Recommendation : Board discussion Consider need for external input
8. BAF/CRR	FT Sec - On review of the CRR it was noted that some of the scores may not take full account of impact across other directorate risk registers so the extent of the risk may be under estimated. The Corporate Directors are therefore asked to review the Risk Registers with this in mind.	Corporate Directors	Recommendation: Holistic review of CRR by Corporate Directors
	Chair - Concern raised re time taken for digital developments and that developments are not prioritised on the basis of addressing highest risks first. Consider if digital development resource is enough and how it should be prioritised.	Board	Recommendation: Board to consider digital resource and prioritisation of use of resource based on risk Assurance: Digital Steering Group meeting this month and prioritisation of resource deployment on agenda

14.MD Report	Chair - Data quality underpinning key metrics in MD report was highlighted as questionable. Inconsistency in recording clinical information and variable use of paper and electronic records provide a potentially unreliable clinical data base. This presents a potentially significant safety risk and also potential inaccuracies in audit and other functions used to guide planning and decision making	Board	Assurance: there is a gap in assurance around clinical data recording and quality, partially mitigated by manual validation processes
17. 12 Hour Breach Report	Chair - This report was discussed with a focus on gaining assurance that every effort was being made to minimise the risk of harm to patients involved. The Committee was assured that there are processes in place to ensure regular monitoring of this group, reviewing clinical condition and optimising comfort in challenging conditions. This was confirmed by the Head of Nursing in Care Group as operational currently.	Board	Assurance: There is a process in place for the regular assessment patients who have long waits in A/E. There is a gap in assurance for patients in the waiting area.
19.AOB	CN - Further C diff outbreak in Scarborough. Infection control has become a major concern in the Trust as highlighted in patient story	Board	Recommendation: patient story to illustrate issues to Board